

NOTICE

MAYURBHANJ SHAKTI SANGHA BLF OFFICE, RARUAN BLOCK

Letter No. 160// Date 09/05/2023

Block Level Federation Raruan Block, At- Block campus near ICDS office, Po – Raruan, Dist – Mayurbhanj invites applications from candidates for the following positions of Community Support Staff for Narasandha, Ghagarbeda, Nuagaon, Budamara, Panpatria, & Tilakuti GPLF of Raruan Block.

| Community Support Staff | CLF/VILLAGE & GPLF/GP | | No of Vacancy | Minimun Educational Qualification | Performance Incentive (Rs. Per Month) | |
|----------------------------|--------------------------------|--|------------------|---|---|--|
| | Name of | All CLF/Village of | 10 | | | |
| ann au | Cluster level | Narasandha GP All CLF/Village of Ghagarbeda GP | 09 | | Rs.3000/- | |
| CRP - CM | Forum/ Name of Village & | All CLF/Village of Nuagaon GP | 10 | 10 th Pass | | |
| | Name of GPLF/GP | All CLF/Village of Budamara GP | 07 | | | |
| | , | All CLF/Village of Panpatria GP | 07 | | | |
| | | Sagarsahi CLF/Village of Tilakuti GP | 01 | | | |
| | | Narasandha | 01 | | | |
| Master Book | Name of | Ghagarbeda | 01 | 12 th /Intermediat | Rs. 6000/- | |
| Keeper(MBK) | GPLF/GP | Nuagaon | 01 | e/ +2 pass | | |
| | | Budamara | 01 | | | |
| | | Panpatria | 01 | | | |
| | | PNB,Budamara | 01 | 4 Oth /I - 1 | Do 6000/ | |
| Bank Mitra | Name of Bank | PNB,Ghagarbeda | 01 | 12 th /Intermediat e/ +2 pass | Rs. 6000/- | |

Other Eligibility Criteria:

- > Should be a woman and an SHG member.
- > Should be able to read and write Odia.
- > Well conversed with local language/dialect.
- > Age: Minimum 18 years.
- > Domicile: Residence of the same village/cluster in case of CRP-CM; same GP in case of MBK; GP/GPs conterminous with the service area of the concerned Bank for Bank Mitra.

Tobasning Migle.

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Mayurahanj Sakti Sangna

RARUAN

Karakalota Mohanda Secretary Mayurbhanj Sakti Sangha RARUAN

GENERAL TERMS & CONDITIONS

- 1) Application form and work description for each position are available at GPLF/BLF office. Candidate may download the Application Form and job profile from the website www.mayurbhanj.nic.in.
- 2) Self-attested documents in support of identity, qualifications, experience, etc. as per the checklist have to be submitted along with application form at BLF Office within the timeline. Original documents shall be produced as and when required.
- 3) The selection process will consist of short listing of candidates on basis of minimum eligibility criteria, academic qualifications, experience and other socio-economic cum special category.
- 4) The prescribed eligibility conditions viz. age, qualification and experience, etc. should have been acquired as on date of notice. Qualification should be from approved recognized institutions.
- 5) In case of false or insufficient information/lack of proof to ascertain the eligibility of the applicant, their candidature will be rejected at any stage of the selection process.
- 6) Applicants shall mention the correct and active mobile number and email-id in the application form.
- 7) CLF/ GPLF/ BLF have all the rights to cancel selection process at any level of selection process.
- 8) The candidate has no right to claim for permanent job with concerned CLF/ GPLF/ BLF/Government.

Sd/-

9) The last date of receipt of application is 15/07/2023

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Mayurahani Sakti Sangha

RARUAN

Mayurbhanj Sakti Sangha

RARUAN

President/Secretary

Block Level Federation (BLF)

ANNEXURE-II APPLICATION FORM FOR COMMUNITY SUPPORT STAFF

| Position applied for – | | |
|---------------------------------------|--------------------|--|
| Name of the CLF: | Name of the | |
| Name of the Bank Branch (Bank Mitra): | Name of the Block: | |

| A | Personal Information | · · · · · · · · · · · · · · · · · · · |
|----|---|--|
| 1 | Full Name of the Applicant | |
| 2 | Sex | Paste recent |
| 3 | Full Name of Father/ Husband | passport size |
| 4 | Full Name of Mother | colour photograph |
| 5 | Date of Birth (DD/MM/YYYY) | |
| 6 | Age as on date of issue of notice (in Completed Years) | |
| 7 | Social Category (Please tick valid option) | Gen ()/ SEBC ()/SC ()/ ST ()/ Minority () |
| 8 | Economic Category (Please tick valid option) | Poor () / EPVG () / Ration Card holder ()/ BPL ()/Annual Income less than Rs.60,000/- () |
| 9 | Special Category (Please tick valid option) | PwD () / Orphan ()/ /PVTG () |
| 10 | Current Address with name of Village, GP, Post Office, Police Station, Block, District, State, Pin | |
| 11 | Permanent Address with name of Village, GP, Post Office, Police Station, Block, District, State, Pin | |
| 12 | Telephone/mobile Number (Mandatory) | |
| 13 | Alternate telephone/mobile Number (Optional) | |
| 14 | Email ID (optional) | |

| В. | Educational Qualif | ication (S | Self atteste | d photocopy | y of Certific | rates & Mar. | k sheets to |
|----------|---|------------------------|---------------------------|--------------------|-------------------------------|------------------------|--------------------|
| SI No | Degree/Diploma/ Certificate Course/ Any other | Total Marks | Total Marks secured | % of marks secured | Institut ion/ College/ School | Universit y / Board | Year of Passing |
| 1 | 10 th Class | | | | | | |
| 2 | 12 th / Intermediate/ +2 | | | | | | |
| 3 | Graduation (Specify)/ +3 | | | | | | |
| 4 | Post Graduate | | | = - | | | 1.6 40 |
| | Any other qualific | cation, I tion belo | TI/additio w | nal degree | e, diploma | degree/ c | ertificate |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |

| C. | Experience | (Self attested photo | copy of experi | ence certificates | and relevant |
|------------|--------------------|--|----------------|-------------------|-----------------------|
| | documents to | o be attached) | | | |
| | | Name and address of SHG/ CLF/ GPLF/Department/ | PERIOD | | Total Period |
| SI. No. | Area of Experience | Organization/ govt. | From | То | (In Years/ Months) |
| | | recognized Institution associated with | (MM/YYYY) | (MM/YYYY) | |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |

| D. | Language Proficiency (Put Tick Mark √ in appropriate column) | | | | |
|------------|--|------|-------|-------|--|
| Sl. No. | Language | Read | Write | Speak | |
| 1 | Odia | | | | |
| 2 | Hindi | | | | |
| 3 | English | | | | |
| 4 | Any O (Specify) | ther | | | |

Documents attached (refer to Annexure-III to know type of documents to be attached)

| SI No. | Name of Document attached | SI No. | Name of Document attached |
|--------|---------------------------|--------|---------------------------|
| 1 | | 7 | |
| 2 | | 8 | |
| 3 | | 9 | |
| 4 | | 10 | |
| 5 | | 11 | |
| 6 | | 12 | |

Declaration

I do hereby, declare that information submitted by me is true to the best of my knowledge. I understand that, in case of false information, my candidature will be rejected at any given point of time and I am also liable for appropriate action.

| Date | Place | Signature |
|------|-------|-----------|