

No.A-35016/12/2005-DP&AR/SS.II(1)/PF.2  
GOVERNMENT OF PUDUCHERRY  
DEPARTMENT OF PERSONNEL AND ADMINISTRATIVE REFORMS  
(PERSONNEL WING)

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Puducherry, dated 03.05.2017

**C I R C U L A R**

Sub: Public Services - Filling up of one post of Office Superintendent in the Indira Gandhi Medical College & Research Institute, Puducherry, on deputation basis - Reg.

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It is proposed to fill up one post of Office Superintendent in the Indira Gandhi Medical College and Research Institute, Kathirkamam, Puducherry on deputation basis from among the Superintendents or else Assistants with minimum 3 years of service and having passed Accounts Test (Higher).

2. It is therefore requested that this may be widely circulated among the Superintendents and Assistants working under the cadre control of this Department in the Puducherry region and applications as per the proforma enclosed be obtained from willing and eligible officials and forwarded alongwith their APARs for the last five years, to this Department on or before **26.05.2017** duly certifying that the particulars furnished by the officials are verified and found to be correct.

3. **It is also requested that the application of the ineligible officials and the application of the officials who have crossed 56 years of age need not be forwarded.**

  
(S. SREENIVASAN) 3/5/17  
DEPUTY SECRETARY TO GOVERNMENT

Encl: As above.

To  
All Heads of Departments/Offices.  
Puducherry.

Copy to:

1. The Director, Indira Gandhi Medical College & Research Institute, Puducherry.
2. Spare copy.

# PROFORMA

1. Name of the Authority :: Indira Gandhi Medical College & Research Institute, Puducherry.
2. Post applied for :: Office Superintendent
3. Name of the Applicant (in BLOCK LETTERS) ::
4. Name of father/ husband ::
5. Present post held and since when ::
6. Level in the pay matrix and present pay drawn ::
7. Date of regular appointment in the present post ::
8. Department in which working at present ::
9. Date of Birth ::
10. Educational Qualification ::
11. Technical Qualification ::
12. Details of Computer Knowledge ::
13. Whether passed Accounts Test (Higher) :: Part-I : Yes / No, Date:  
Part-II: Yes / No, Date:
14. Details of Service (including deputation service) ::

Sl. No.	Designation	Department	Period	
			From	To

15. Whether belongs to SC/ST ::
16. Residential Address ::
17. Remarks ::

Place:  
Date:

Signature of candidate

To be certified by the Head of Office

Certified that the particulars of the applicant have been verified and found correct.

No vigilance / disciplinary proceedings are either pending or contemplated against the official.

SIGNATURE OF  
HEAD OF DEPARTMENT/OFFICE  
SEAL: