No.A-35015/4/2017-DP&AR/SS.II(1) GOVERNMENT OF PUDUCHERRY DEPARTMENT OF PERSONNEL AND ADMINISTRATIVE REFORMS (PERSONNEL WING)

Puducherry, dated 28.11.2017

CIRCULAR

Sub: Public Services – Filling up of Office Manager, UDC and LDC in Puducherry Municipality on deputation basis – Applications called for.

It is proposed to fill up the posts of Office Manager, UDC and LDC in the Puducherry Municipality on deputation basis without deputation allowance from among the Superintendents, UDCs and LDCs respectively:

SI. No.	Name of the Post	No. of posts		
1	Office Manager	3		
2	Upper Division Clerk	5		
3	Lower Division Clerk	5		

- 2. It is therefore requested that this may be widely circulated among the Superintendents, UDCs and LDCs of this Administration working under the cadre control of this Department and applications as per the proforma enclosed be obtained from the eligible willing officials and forwarded alongwith their APARs for the last five years, to this Department on or before 15.12.2017 duly certifying that the particulars furnished by the officials are verified and found to be correct.
- 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.

/ BY ORDER /

ST Ganapadly (S. THAMMU GANAPATHY)

DEPUTY SECRETARY TO GOVERNMENT

Encl: As above.

To

All Heads of Departments/ Offices.

Copy To:

- 1. The Director of Local Administration, Puducherry.
- The Commissioner, Puducherry Municipality.

	PROFO	RMA			
1. Name of the Municipality		Puducher	y Municipa	lity	
2. Post applied for	::				
3. Name of the Applicant (in BLOCK LETTERS)					
4. Name of father/ husband					
5. Present post held and since when	• ::				
Level in the Pay matrix and presen pay drawn					
7. Department in which working at present					
B. Date of Birth					
9. Educational Qualification					
10. Technical Qualification					
11. Details of Computer Knowledge					
12. Details of Service (including deputation service)					
c ₁	Department		Period		
No. Designation			Fron	n	To
		0.9			
3. Whether belongs to SC/ST	::				
4. Residential Address	::				
5. Remarks/ Phone Number	::				
Place: Date:			Signature	of candi	idate
To be certifie	ed by the	Head of (Office		
Certified that the particular	's 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: