

No.A-35016/12/99-DPAR/SS.II(1)
GOVERNMENT OF PUDUCHERRY
DEPARTMENT OF PERSONNEL AND ADMINISTRATIVE REFORMS
(PERSONNEL WING)

Puducherry, dated 02.07.2014.


C I R C U L A R

Sub: Public Services - Filling up the post of Manager(Administration) in the Puducherry Backward Classes and Minorities Development Corporation Ltd., Puducherry, on deputation basis - Reg.

It is proposed to fill up one post of Manager(Administration) in the Puducherry Backward Classes and Minorities Development Corporation Ltd.(PBC&MDC), Puducherry from among the Assistants with 5 years of service having passed Accounts Test(Higher), on deputation basis.

2. It is therefore requested that this may be widely circulated among the Assistants working under the 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 **31.07.2014** 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 are likely to superannuate within a period of three years need not be forwarded.


(M. KANNAN)

UNDER SECRETARY TO GOVERNMENT(DP&AR)

Encl: As above.

To
All Heads of Departments/ Offices,
Puducherry.

Copy to:

1. The Managing Director, PBC&MDC, Puducherry
2. Spare copy.

PROFORMA

1. Name of the Authority :: PUDUCHERRY BACKWARD CLASSES
AND MINORITIES DEVELOPMENT
CORPORATION LIMITED, PUDUCHERRY.
2. Post applied for :: MANAGER(ADMINISTRATION)
3. Name of the Applicant ::
(in BLOCK LETTERS)
4. Name of father/ husband ::
5. Present post held and since ::
when, scale of pay and
pay drawn at present
6. Department in which working
at present ::
7. Date of Birth ::
8. Educational Qualification ::
9. Technical Qualification ::
10. Details of Computer Knowledge ::
- 11 Whether passed Accounts Test Part-I : Yes / No, Date:
(Higher) :: Part-II: Yes / No, Date:
12. Details of Service ::
(including deputation service)

Sl. No.	Designation	Department	Period	
			From	To

13. Whether belongs to SC/ST ::
14. Residential Address ::
15. 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: