### NOTICE

## SARASKANA BLF OFFICE, SARASKANA BLOCK

Letter No. 69 Date. 21/03/2023

Block Level Federation Saraskana Block, At - Block Rajib Gandhi Seva Kendra, Po - Saraskana, Dist.- Mayurbhanj invites application/s from candidates for the following positions of Community Support Staff for Bagbuda, Jalda, Jharpokharia, Pokharidiha & Bhursani GPLF of Saraskana Block.

Community Support Staff	CLF/VILLAGE & GPLF/GP	No. of Vacancy	Minimum Educational Qualification	Performance Incentive (Rs. Per Month)
CRP-CM	No.of CLF	93	10th pass	Rs.3000/-
Master Book Keeper (MBK)	No.of GPLF	10	12th/Intermedi ate/+2 pass	Rs.6000/-
Bank Mitra	OGB Saraskana, OGB Rajaloka & BOI Sirsa	3	12th/Intermedi ate/+2 pass	Rs.6000/-

The CLF/GP/GPLF/Bank Branch wise vacancy details are attached herewith in Annexure-1 for reference.

### 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 coterminous with the service area of the concerned Bank for Bank Mitra.

#### **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 district website of 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.
- 9) The last date of receipt of application is 04.04.2023 by 5.30 PM.

President

**Block Level Federation (BLF)** 

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President W.S.H.G. Mahasangha, Saraskana Lhinodoo Souhl Secretary

**Block Level Federation (BLF)** 

Secretary vv.S.H.G. Mahasangha, Saraskans

# CLF/GPLF , Village/GP & Bank Branch wise vacancy details(Annexure-1)

Community Support Staff		CLF/VILLAGE & GPLF/GP	No. of Vacancy	Minimum Educational Qualification	Performance Incentive (Rs. Per Month)	
		All Village of Saraskana GP	14		1/2	
		All Village of Sirsa GP	10			
		All Village of Dhangudisole GP	10			
		All Village of Silfodi GP	5			
	Name of Cluster	All Village of Rajaloka GP	7			
CRP- CM	Level Forum/ Name of Village &	All Village Umadeipur GP	14	10th Pass	Rs.3000/-	
		All Village Sankhabhanga GP	9			
		All Village Murunia GP	9			
		All Village Pandra GP	3			
		All Village pokharia GP	10			
		Paniposi & Deuli village of Jalda GP	2			
		Saraskana GP	1	12th/	Rs.6000/-	
		Sirsa GP	1			
		Dhangudisole GP	1			
		Silfodi GP	1			
Master Book		Rajaloka GP	1			
Keeper (MBK)		Umadeipur GP	1	Intermediate/ +2 Pass		
		Sankhabhanga GP	1			
		Murunia GP	ļ			
		Pandra GP	1			
		Pokharia GP	1			
Bank Mitra	BOI, Sirsa	Pandra, Sirsa, Bagbuda, Murunia GP,	1			
	OGB, Sankucha	Dhangudisole GP	1	12th/ Intermediate/	Rs.6000/-	
	OGR Saraskana I	Saraskana, Pokharia, Silfodi, Joka, Paktia, Sankhabhanga, Pokhardiha	1	+2 Pass		

Block Level Federation(BLF) President

W.S.H.G. Mahasangha, Saraskana

Block Level Federation(BLF)

Secretary W.S.H.G. Mahasangha, Saraskana

## ANNEXURE-II APPLICATION FORM FOR COMMUNITY SUPPORT STAFF

Position applied for -		
Name of the CLF:	Name of the	
GPLF:		
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	Gen (	)/ SEBC (	)/SC (	)/ ST ( )/ Minority
	valid option)	( )			
8	Economic Category (Please tick	Poor (	)/EPVG(	) / Rat	tion Card holder ( )/
-	valid option)	BPL (	)/Annual Incom	ne less th	an Rs.60,000/- ( )
9	Special Category (Please tick	PwD (			
	valid option)	PWD (	) / Orphan (	)/ /PV	TG ( )
10	Current Address with name of				
	Village, GP, Post Office, Police				
	Station, Block, District, State,				
	Pin				
11	Permanent Address with name of		The state of the s		
	Village, GP, Post Office, Police	,			
	Station, Block, District, State,				
	Pin				
12	Telephone/mobile Number		The second of th	ACTUAL CONTRACTOR OF THE PARTY.	til
	(Mandatory)				
13	Alternate telephone/mobile			AND STATE OF	
	Number (Optional)				
14	Email ID (optional)			Table and construct to the found to the last	
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B.	Educational Qualification (Self attested photocopy of Certificates & Mark sheets to						
	be attached)						
SI . No	Degree/Diploma/ Certificate Course/ Any other	Total Marks	Total Marks secured	% of marks secured	Institut ion/ College/ School	University / Board	Year of Passing
1	10 <sup>th</sup> Class						
2	12 <sup>th</sup> / Intermediate/ +2						
3	Graduation (Specify)/ +3						
4	Post Graduate (Specify)						
	Any other qualific course. If Yes, men			nal degree	e, diploma	degree/ c	ertificate
5							
6							
7							
8							

SI. No.	Area of GPL Experience Orga recog Instit	Name and address of SHG/ CLF/ GPLF/Department/	PEI	RIOD	Total Period
		Organization/ govt. recognized Institution associated with	From (MM/YYYY)	To (MM/YYYY)	(In Years/ Months)
1					
2					
3					
4					

D.	Language Proficience	cy (Fut Tick)	THE P	
Sl. No.	Language	Read	Write	Speak
1	Odia	<u>.</u>		
2	Hindi			
3	English			
4	Any Other (Specify)			

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

Name of Document attached	Sl No.	Name of Document
	7	
	8	
	9	
	10	
	11	
	12	
	Name of Document attached	7 8 8 9 10 11

## 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.

Data	Place	Signature
Date	1 10.00	