

SHAKTIRUPA FEDERATION, BARGAON

PO: BARGAON, DIST: SUNDARGARH, MOB. NO. 9938705773, 9777817456, SGD NO. 5666-84 OF 2008

Letter No: 57

Date: 21.02.23

Shaktirupa Federation (BLF), Bargaon invites application/s from candidates for the following positions of Community Support Staff

| Name of the Post | Name of the GPLF | Service Area | No. of vacancy | Minimum Educational Qualification | Performance Incentive (Rs. Per Month) |
|--------------------------|---|-----------------------|----------------|---|---------------------------------------|
| CRP-CM | Bhoipali GPLF Po: Bhoipali PS: Bargaon Dist: Sundargarh Pin: 770016 | Bhoipali CLF | 1 | 10 th Pass | Rs.3000/- |
| | | Kharikamunda CLF | 1 | | |
| | | Demupada CLF | 1 | | |
| | | Chalnamunda CLF | 1 | | |
| | | Gariamal CLF | 1 | | |
| | | Raidihi Kisanpada CLF | 1 | | |
| | | Raidihi Chemapada CLF | 1 | | |
| Master Book Keeper (MBK) | Bhoipali GPLF Po: Bhoipali PS: Bargaon Dist: Sundargarh Pin: 770016 | Bhoipali GP | 1 | 12 th / Intermediate/+2 Pass | Rs.6000/- |

ELIGIBILITY CRITERIA FOR SELECTION OF COMMUNITY SUPPORT STAFF

1. Community Resource Person for Community Mobilization (CRP-CM)

- Shall be a woman and an SHG member.
- Shall be able to read and write odia.
- Shall be well conversed with local language/dialect.
- Age: minimum 18 years.
- Educational Qualification: minimum 10th pass.
- Domicile: shall be resident of the same village/cluster.

2. Master Book Keeper (MBK)

- Shall be a woman and an SHG member.
- Shall be able to read and write odia.
- Shall be well conversed with local language/dialect.
- Age: minimum 18 years.
- Educational Qualification: minimum Intermediate/ 12th /+2 pass.
- Domicile: shall be resident of the same GP.

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- ਮਾਨਵਿਕ ਬਲ ਸਾਹਿਬ ਮਾਨਵਿਕ

President
SHAKTIRUPA FEDERATION

Pranab Barua
21/2/2023
Secretary
Shaktirupa Faderation
Barpeta

1. Copy submitted to the Chief Development Officer-cum-Executive Officer, Zilla Parishad, Sundargarh for kind information and uploading the same in website for wider circulation and access.
2. Copy submitted to The Chairman, Bargaon/ The BDO, Bargaon / The CDPO, Bargaon for kind information.

॥ श्रीगणेशाय नमः ॥

President
SHAKTIRUPA FEDERATION
BARGAON

Pocumtuck Bank
2/2/2023

Secretary
Shaktirupa Faderation
Bargaon

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 | | <i>Paste recent passport size colour photograph</i> |
| 2 | Sex | | |
| 3 | Full Name of Father/ Husband | | |
| 4 | Full Name of Mother | | |
| 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) | | |

| | |
|-----------|--|
| B. | Educational Qualification <i>(Self attested photocopy of Certificates & Mark sheets to be attached)</i> |
|-----------|--|

| Sl. No. | Degree/Diploma/ Certificate Course/ Any other | Total Marks | Total Marks secured | % of marks secured | Institution / College/ School | University / Board | Year of Passing |
|--|---|-------------|---------------------|--------------------|-------------------------------|--------------------|-----------------|
| 1 | 10 th Class | | | | | | |
| 2 | 12 th / Intermediate/ +2 | | | | | | |
| 3 | Graduation (Specify)/ +3 | | | | | | |
| 4 | Post Graduate (Specify) | | | | | | |
| Any other qualification, ITI/additional degree, diploma/ degree/ certificate course. If Yes, mention below | | | | | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |

| C. Experience (Self attested photocopy of experience certificates and relevant documents to be attached) | | | | | |
|--|--------------------|---|----------------|--------------|---------------------------------|
| Sl. No. | Area of Experience | Name and address of SHG/ CLF/ GPLF/Department/ Organization/ govt. recognized Institution associated with | PERIOD | | Total Period (In Years/ Months) |
| | | | From (MM/YYYY) | To (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 Other (Specify) | | | |

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

| Sl No. | Name of Document attached | Sl 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

Cut from Here



Acknowledgement

Application No: _____

I Ms/Smt..... acknowledge receipt of application of
Ms/Smt..... for the position of for
..... CLF GPLF.....
under.....BLF on date..... at

Full Name & Signature of receiver

With seal and stamp