

ELECTION MATTER
TIME BOUND

GOVT. OF NCT OF DELHI
DEPARTMENT OF SOCIAL WELFARE
(ADMINISTRATION BRANCH-II)
7TH FLOOR, MSO BUILDING, I.P. ESTATE
NEW DELHI-110002

No.F44(11)/Election/Misc/2023/1098-1113

Dated:- 5/10/23

CIRCULAR

Sub:- Manpower for Lok Sabha Election-2024

Please find enclosed herewith a Form for Entering Details of Polling Personnel for Lok Sabha Election-2024. It is, therefore, requested to furnish the information in the prescribed proforma of all regular officers/officials(Group A to C) working under your kind control including himself/herself to the undersigned within 2 days, so that it can uploaded on the election portal timely.

Encl:- As above.


Section Officer (Admn)

No.F44(11)/Election/Misc/2023/1098-1113

Dated:- 5/10/23

Copy to:-

- 1.All Branch In Charge, Department of Social Welfare, HQ, 7th Floor, MSO Building, ITO, Delhi-110002.
2. ☒ Sr. System Analyst with the request to upload the circular with Form for entering detail of Polling Personnel on the website.


Section Officer (Admn)

1025/cc

5/10/23

493

Form For Entering Details of Polling Personnel

Note: All * mark entries are must to provide.

Entry of employee is to be done by the office in which the employee is physically working.

EPIC No./Voter Id Card No* :- _____

Personal Information

Title of Official/Officer * :- Sh./Ms. _____

First Name of Official/Officer* :- _____

Middle Name of Official/Officer* :- _____

Surname of Official/Officer* :- _____

Gender * :- Male Female Third Gender

Marital Status * :- Unmarried Married Single Widow Widower

Father Name * :- _____

Spouse Name: - _____

Date of Birth (DD/MM/YYYY) * :- _____

Employee Category * :- _____

Department in which physically working * :- _____

Office Details in which physically working* :- _____

Whether Presently Residing in Delhi * :- Delhi Outside Delhi

Present Residential Address * :- _____

Pin Code*:- _____

Mobile No. * :- _____

Alternate Contact No. :- _____

E-Mail ID :- _____

Whether Appointed as BLO/BLO Supervisor * :- YES NO

If BLO, Assembly Constituency where posted as BLO _____

If BLO, AC Part No*:- _____

Whether belongs to any cadre :-

Whether employee on Long Leave, i.e. CCL/Medical Leave/EL. etc. :-

Leave Duration: - _____

Assembly Constituency

AC of Present Residential Address: - _____

AC in which working Presently: - _____

Specify the Home Town of Employee * :- Delhi Outside Delhi

AC of Home Town :- _____

Whether Register Voter * :- YES NO

Other Information

Whether Person with Disability * :- YES NO

Type of Disabilities:-

Percentage of Disabilities: - _____

Remarks:- _____