Election Matter Most Immediate 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/ /2552-/26//

Dated:-

0 6 OCT 2023

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 feed the information on the Election portal of DSW(HQ) all regular officers/Officials (Group A to C) working under your kind control including himself/herself and also generate the confirmation certificate before 10/10/2023 so that the confirmation certificate at the level of Nodal Officer, Election, DSW (HQ) may also be generated to Election office at DSW (HQ) level before 12/10/2023.

URL ceo.delhi.gov.in has been placed under operational mode by the CEO office. it is requested to access the said URL for further verifying and uploading the details of all officers/officials of your office accordingly.

For any query related to the election contact Sh. Pankaj, DEO (outsourced) at no. 9873474066 and Sh. Sunil Kumar, Jr. Assistant at no. 8826720982.

Encl:- As above.

6/10/53

Nodal Officer, Election , DSW(HQ)

No.F44(11)/Election/Misc/2023/ 12552-126/1

0 6 OCT 2023

To All District/Homes/Institution, Department of Social Welfare, GNCT of Delhi (as per Annexure-A).

2. To Sr. System Analyst, DSW (HQ) with the request to upload the circular on the website of the Department.

Nodal Officer, Election , DSW(HQ)



Form For Entering Details of Polling Personnel

Note: All * mark entries are must to provide.

ntry 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				

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If BLO, AC Part No*:-		
Whether belongs to any cadre :-		
Whether employee on Long Leave, i.e. CCL/Mo	edical Leave/EL. etc. :-	
Leave Duration: -		
Assembly Constituency	(4)	
AC of Present Residential Address: -		- 1
AC in which working Presently: -	1	
Specify the Home Town of Employee *:-	Delhi Outside Delhi	
AC of Home Town :-		
Whether Register Voter * :- YES NO	,	
whether Register voter " :- YES INO	*	
whether Register voter " :- YES INO	**	
Other Information		
Other Information	YES NO	
Other Information		\$0
Other Information Whether Person with Disability *:- Y		\$5