(REMINDER-IV)
MOST URGENT
OUT TODAY

Govt. of NCT of Delhi
Department of Social Welfare
7th Floor, MSO Building, ITO
I.P. Estate, New Delhi-110002
(Administrative Branch)

DSW-A041/43/2026/-Admin-I-Social Welfare Department 4125-4184 **Dated:** 22/07/2026

CIRCULAR

Subject: Reminder regarding non-submission/delay in submission of Biometric Attendance Report.

Kind attention is invited to this office circular no. F.44(115)/2024/DSW/Admn/2763-2822 dated 05.06.2026 and F.44(115)/2024/DSW/Admn/3188-3247 dated 22.06.2026 (Reminder-I) and Reminder-II dated 03.07.2026 and Reminder –III dared 16.07.2026 regarding submission of the Biometric Attendance Report of officers/officials working under the respective branches/offices of the Department of Social Welfare, GNCTD.

Despite issuance of the above-mentioned instructions, it has been observed that the Biometric Attendance Reports for the month of **May, 2026** and subsequent weekly reports w.e.f. **01.06.2026 onwards** have not been received in latest format (Annexure-I) from all branches/offices till date.

In this regard, it is to inform you that the information has been sought by the Administrative Reforms Department vide OM dated 16.06.2026 and Hon'ble Social Welfare Minister also desired the same vide letter dated 14.07.2026.

All the Dy. Directors/SOs/Superintendents/Branch In-charges of Homes/Institutions/District Offices are hereby **directed to ensure immediate submission of the pending Biometric Attendance Reports** duly verified and certified in the **latest format (Annexure-I)**, to the Administration Branch at email ID **ddadmn2@gmail.com till 10:30 AM on daily basis now** without any further delay.

It is once again reiterated that the timely submission of **the reports in prescribed format (Annexure-I)** is mandatory and any delay/non-submission of the same shall be viewed seriously. The responsibility for timely submission, verification, and correctness of the attendance data shall solely rest with the concerned Branch In-charge/Controlling Officer.

All concerned are directed to treat the matter as **Most Urgent** and ensure compliance without fail.

This issues with the prior approval of Competent Authority.

Deputy Director (Admin)

DSW-A041/43/2026/-Admin-I-Social Welfare Department 4125-4184 **Dated:** 22/07/2026

Copy to:

1. PPS to Additional Chief Secretary (SW), Department of Social Welfare, 7th Floor, MSO Building, ITO, New Delhi-110002.
2. PA to Director (SW), Department of Social Welfare, 7th Floor, MSO Building, ITO, New Delhi-110002.
3. PPS to Deputy Director (Admn), Department of Social Welfare, GNCTD, 7th Floor, MSO Building, ITO, New Delhi-110002.
4. All DDs/DSWOs/DDOs/HOOs/Incharges of the Homes/Institutions/District Offices/Branches, Department of Social Welfare, GNCT of Delhi (for information and necessary action).
5. Assistant Director(IT), IT Branch, DSW with the direction to register all officers/officials of DSW(HQ).
6. All Branch Incharges, DSW (HQ), 7th Floor, MSO Building, ITO, New Delhi-110002
7. Sr. System Analyst, DSW for uploading the circular on the departmental website.
8. Guard file.

161/CC
23/07/26

Deputy Director (Admin)

Digitally signed by
Sanjay Kumar Ambasta
Date: 22-07-2026
15:31:33

Annexure-I

Name of Office/Branch/Home/Institution/District Office :

Name of Branch In-charge/Controlling Authority :

Biometric Attendance Printout Attached with this performa (Y/N) :

S. No	Name of the Officer/Official	Designation	Regular/Contractual/Outsource/other (Specify)	Place of Posting Home/Institution and other field establishment (Shiftwise)	On time or Late Commer how many days with dates	Earlier Departure how many days with dates	Biometric Attendance Marked In and Out (Y/N)	Office Timing/ Shift Timing, if applicable	Remarks, if any
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

1. The attendance details have been verified from the biometric attendance system.
2. This Proforma shall be submitted **on daily basis (till 10:30 AM) on email id ddadmn2@gmail.com** along with the biometric attendance report.
3. Incomplete or uncertified Proformas shall not be accepted.

Signature of Branch In-charge/Controlling Authority.....

Name: _____

Designation: _____

Date: _____