FORM FOR NOTIFICATION OF VACANCIES

1.	Office/Department and address		:			
2.	Name and designation of Indenting		:			
	Office, Telephone No.					
3.	Name and designation of the Office	r to	:			
	whom applicants should report.					
4.	Date, time and place of interview		10.00			
5.	(a) Designation of the post(s)		:			
	(b) Scale of pay, allowances		:			
	(c) Place of work		:			
	(d) Age		:			
	(e) Whether women are eligible?		:			
5.	(a) Number of posts to be filled		:(b) Du	ration of	vacancie	es:
			Perma - nent	Tempo- rary less than 3 months	Tempo- rary between 3 months and 1 year	
	(i) Reserved for S.Cs Priority Reserved for S.Cs-Non-Prior	ity	: :			i yeai
	(ii) Reserved for S.Ts Priority Reserved for S.Ts Non-Prior	ity	:			
	(iii) Reserved for O.B.Cs Priority Reserved for O.B.Cs Non-Pri	ority	: :			
	(iv) Reserved for Ex-Servicemer	1:				
	(v) Unreserved-Priority Unreserved-Non-Priority					
	(vi) Reserved for Physically hand	dicapp	ed			
	Blind Deaf	% %				
	Orthopeadically Handicapped	%				

7. Qualification required

	(a) Essential	:		
	(b) Desirable	:		
8.	Whether willing to wait and consider applicants from other Exchange area in case local applicants are not available.	of p		
9.	Any other information considered relevant.			
	Certified that the number of stes/Scheduled Tribes and Ex-Servicement of accordance with the reservation quota fix			
Pla	ce:			
Da	te:	Signature of	the Head of	f Office
То		3		
	e Employment Officer, ployment Exchange.			