

IMMEDIATE
ELECTION MATTER

A-50013/409/2023-Admn.
Government of India
Ministry of Jal Shakti
Department of Water Resources, RD & GR
(Admn. Section)

Shram Shakti Bhawan, Rafi Marg,
New Delhi. dated 7th November, 2023

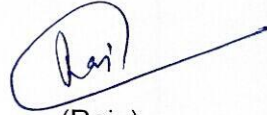
OFFICE MEMORANDUM

Subject: Providing details of Polling Personnel for General Elections, 2024- reg.

The undersigned is directed to refer to the above mentioned subject and to say that all officers/officials upto the level of Director & equivalent (except the employees of Service Sections viz. Admn., General Admn. & Cash, employees in the O/o Hon'ble Minister & MoS, personal staff of officers of the level of Joint Secretary and above) are requested to fill up the prescribed proforma (enclosed) and submit the duly filled & signed proforma in Admn. Section, D/o WR, RD & GR latest by **21.11.2023** positively without fail.

2. All Wing Heads/Division Heads/Branch Heads are requested to ensure submission of the above information by employees working under their control (except the officers mentioned above) urgently.
3. The matter may be accorded PRIORITY.

Encl.: As Above



(Raju)

Under Secretary to the Govt. of India
Tel.: 23738126

To

1. All Wing Heads/Division Heads/ Branch Heads of Water Resources, RD & GR
2. All Employees upto the rank of Director & equivalent of the DoWR, RD & GR
3. PPS to Secretary/ PPS to MD (NWM)/ PPS to DG (NMCG)/ PS to JS (A)/ PS JS (RD & PP)/ PS to JS (NRCD)/ PS to JS & FA, DoWR, RD & GR

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. * (For Delhi) :- _____

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

Whether Pregnant (if Female):- Yes NO

Marital Status*:- Unmarried MarriedSingle Widow Widower

Father Name*:- _____

Spouse Name: - _____

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

Employee Category*:- _____
(Group A/B (Gazetted)/B (non-Gazetted)/C/ MTS)

Designation*:- _____

Pay Commission*:- 6th, & 7th or Other

Pay Level or Grade Pay*:- _____

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*:- _____

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 HomeTown (if Delhi):- _____

Whether Register Voter in Delhi* :- YES NO

Other Information

Whether Person with Disability* :- YES NO

Type of Disabilities:-

Percentage of Disability:- _____

Remarks:- _____