F.No.21/3/2015-CS-I (S)
Government of India
Ministry of Personnel, Public Grievances & Pensions
Department of Personnel & Training
(CS.I Division)

2nd Floor, A Wing, Lok Nayak Bhawan,
Khan Market, New Delhi
Dated : 21th July, 2016

OFFICE MEMORANDUM

Subject: Filling up vacant posts of Section Officer of CSS (Administrative Officer) in Indian Institute of Legal Metrology, Ranchi (Jharkhand) – regarding.

The Indian Institute of Legal Metrology, Ranchi is a Sub-Ordinate office under the administrative control of Department of Consumer Affairs. One post of Section Officer of CSS (Administrative Officer) is lying vacant in III.M, Ranchi.

2. In terms of Para 15 of RTP dated 16.07.2015, Ministries/Departments are requested to circulate this vacancy among CSS officers and forward applications of willing officers to CS.I Division, DOP&T by 20th August, 2016. The applications should be submitted in the format enclosed. While forwarding applications, vigilance status of the officer should also be indicated.

(Chandra Shekhar)
Under Secretary to the Govt. of India
Tel: 011-24624046

To

All the Ministry/Departments of Government of India
Under Secretary (Admn./Estt.)
Request for Posting to the post of

At

1. PERSONAL INFORMATION
   1. Name
   2. Designation
   3. Date of Birth
   4. Present Ministry/Department
   5. Contact Number
   6. Education Qualification

2. EXPERIENCE

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<th>Ministry/Department</th>
<th>Period (Give Dates)</th>
<th>Subject Dealt (in brief)</th>
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3. Reasons for posting:

Certified that I have verified the data in respect of me in the web based cadre management system and the data available therein is correct and upto date.

Date ____________________________

(signature of the applicant)

Name ____________________________

(For Adm. Division of Ministry/Department)

Forwarded

It is certified that the details of the officer in the web based cadre management is complete, correct and upto date.

The officer is clear from vigilance angle.

Signature ____________________________

Name ____________________________

Date ____________________________