REMINDER MOST IMMEDIATE ELECTION MATTER

File No. 19012/52/2024-Estt.V
Government of India
Ministry of Jal Shakti
Department of Water Resources RD & GR
Central Water Commission
Establishment V Section

3rd Floor (S), Sewa Bhawan, R. K. Puram, New Delhi - 66. Dated the 13/08/2024.

Sub.: <u>Information Regarding polling personnel for Delhi Legislative Assembly Election, 2025-reg.</u>

Please refer to this Sections letter of even no. dated 02.08.2024 and Estt.IV Section's OM dt. 30.07.2024 on the subject mentioned above. The details of all AD-IIs/SDEs having grade pay not more than 8700/- (Posted in Delhi HQ) have yet not been received in this Section of all Officers (only 38 nos of details have been received) till date. Being an election related matter, failure to comply with these instructions will be viewed seriously. Therefore once again it is requested to furnish the details of all officers without exception in prescribed proforma to this Section TODAY ITSELF.

Encl.: As above.

(Sumitra Toppo) UNDER SECRETARY Ph.No. 29583356

To:

- Director (Coord.), D&R Wing, CWC
- 2. Director(Coord.), WP&P Wing, CWC
- 3. Director(Coord.), RM Wing, CWC and
- 4. Director(Coord.), HRM Wing, CWC

	Detail	Employee 1	Employee 2
1	EPIC No./Voter ID Card No.		8
2	Title of Official/Officer (Sh./Ms.)		
3	First name		
4	Middle Name of Official/Officer(Only Alphabets)		
5	Surname of Official/Officer(Only Alphabets)		
6	Gender		
7	Whether Pregnant(Yes/No)		
8	Marital Status		
9	Father Name(Only Alphabets)		
10	Spouse Name(only Alphabets)	-10 4 10	
11	Date of Birth(DD/MM/YYYY)		
12	Employee Category		
13	Designation		
14	Pay Level		
15	Whether Presently Residing in(Delhi/Outside Delhi)		
16	Present Residential Addres		
17	Pin Code		
18	Mobile No	100 23	
19	Alter Nate Contact No.		
20	e-mail ID		
21	Whether Appointed as Booth Level Officer/BLO Supervisor (Yes/No)		
22	Whether belongs to any cadreDANICS/IAS/IES/IPS/IRS/ISS		
23	Whether EMPLOYEE ON Long Leave		
24	(CCL/EL/Maternity Leave/Out of India/Medical leave		
25	Leave duration		
26	Assembly Constituency of Present Residential Address		
27	Specify the Home Town of Employee		
28	Assembly Constituency of Home Town		
29	Whether person with Disability (Yes/No)	7 79	
30	Percentage of Disabilities		
31	Remarks		