



ZILLA PARISHAD, DHENKANAL  
(OLM Cell)

At- Mahisapat/ Dist: - Dhenkanal/ Pin-759001/ Tel. No. 06762-24506 /E-mail: ori-ddhenkanal@nic.in

Letter No. 17 Dt. 09/05/23

To

The DIO,  
NIC, Dhenkanal.

Sub: Publication of Advertisement for selection of MBK(Master Book Keeper)& CRP(Community Resource Person) Community Support Staff under Odisha Livelihoods Mission, Department of Mission Shakti through web hosting .

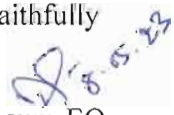
Ref: Letter No.1343/2022/OLM/IBCB/CG/01/2018, Date-21.10.22 of Mission Shakti Department, Govt. of Odisha & Letter No-736, Dt-24.02.23 of BDO, Sadar.

Sir,

I am to enclose herewith the advertisement paper mentioned above for publication in the District website from 06.05.23 to 20.05.23 regarding selection of 12 nos of Master Book Keepers, 88 nos of CRP-CM & 07 nos of Bank Mitra in 12 nos of GPs of Sadar Block under Odisha Livelihoods Mission, Deptt. of Mission Shakti which details are as follows:

| SL No | Name of the GP | Available post of MBK | Available post of CRP-CM | Available post of Bank Mitra |
|-------|----------------|-----------------------|--------------------------|------------------------------|
| 1     | Baliamba       | 1                     | 6                        | 0                            |
| 2     | Barada         | 1                     | 9                        | 1                            |
| 3     | Beltikiri      | 1                     | 7                        | 1                            |
| 4     | Bhaliabokateni | 1                     | 5                        | 0                            |
| 5     | Bhapur         | 1                     | 12                       | 1                            |
| 6     | Kakudibhag     | 1                     | 8                        | 1                            |
| 7     | Madhusahupatna | 1                     | 6                        | 1                            |
| 8     | Nagiapasi      | 1                     | 6                        | 0                            |
| 9     | Sankulei       | 1                     | 5                        | 1                            |
| 10    | Sogarposi      | 1                     | 8                        | 0                            |
| 11    | Kaimati        | 1                     | 7                        | 0                            |
| 12    | Sankarpur      | 0                     | 1                        | 0                            |
| 13    | Suakhaikateni  | 1                     | 8                        | 1                            |
|       | Total          | 12                    | 88                       | 7                            |

Yours Faithfully

  
CDO-cum-EO  
ZP, Dhenkanal

Annexure-I: Sample Notice.

Annexure-II: Application Form for Community Support Staff.

Annexure-III: Checklist of Documents to be submitted.

## ANNEXURE-I SAMPLE NOTICE

.....BLF Office, .....Block

Letter no.

Date.

Name of BLF ..... (Address) invites application/s from candidates for the following positions of Community Support Staff

| Community Support Staff  | CLF/GPLF   | No. of Vacancy | Minimum Educational Qualification             | Performance Incentive (Rs. Per Month)                                  |
|--------------------------|--|----------------|---|--|
| CRP- CM                  | Name of Cluster Level Forum<br>Name of Village<br>Name of GPLF |                | 10 <sup>th</sup> Pass                         | Rs.3000/-  |
| Master Book Keeper (MBK) | Name of GPLF<br>Name of GP                                     |                | 12th/<br>Intermediate/<br>+2 Pass             | Rs.6000/-  |
| Bank Mitra               | Name of Bank<br>Service Area GP/GPs                            |                | 12 <sup>th</sup><br>/Intermediate/<br>+2 Pass | Rs.6000/-  |
| CRP-EP                   | Name of Nodal GPLF/BRC<br>Name of Block<br>Name of GP-2        |                | 10 <sup>th</sup> Pass                         | Rs.1000/-  |
| BDSP                     | Name of Nodal GPLF<br>Name of Block                            |                | 12 <sup>th</sup> /Intermedia<br>te/+2 Pass    | Rs,2000/- fixed pay and up to Rs.1000/- per enterprise as variable pay |

### Other Eligibility Criteria:

- Should be a woman and an SHG member
- Should be able to read and write Odia
- Well conversed with local language/dialect
- Age: minimum 18 years
- Domicile: Residence of the same village/cluster in case of CRP-CM; same GP in case of MBK; GP/GPs coterminous with the service area of the concerned Bank for Bank Mitra; same block in case of BDSP and CRP-EP.

## GENERAL TERMS & CONDITIONS

- 1) Application form and work description for each position are available at GPLF/BLF office. Candidate may download the Application Form and job profile from the website of Chief Development Officer-cum- Executive Officer .
- 2) Self-attested documents in support of identity, qualifications, experience, etc. as per the checklist have to be submitted along with application form at BLF Office within the timeline. Original documents shall be produced as and when required.
- 3) The selection process will consist of short listing of candidates on basis of minimum eligibility criteria, academic qualifications, experience and other socio-economic cum special category.
- 4) The prescribed eligibility conditions viz. age, qualification and experience, etc. should have been acquired as on date of notice. Qualification should be from approved recognized institutions.
- 5) In case of false or insufficient information/lack of proof to ascertain the eligibility of the applicant, their candidature will be rejected at any stage of the selection process.
- 6) Applicants shall mention the correct and active mobile number and email-id in the application form.
- 7) CLF/ GPLF/ BLF have all the rights to cancel selection process at any level of selection process.
- 8) The candidate has no right to claim for permanent job with concerned CLF/ GPLF/ BLF/Government.
- 9) **The last date of receipt of application is \_\_\_\_\_**

Sd/-

President/Secretary  
Block Level Federation (BLF)

*Subit*



**ANNEXURE-II APPLICATION FORM FOR COMMUNITY SUPPORT STAFF**

Position applied for –

Name of the CLF: \_\_\_\_\_ Name of the GPLF: \_\_\_\_\_

Name of the Bank Branch (Bank Mitra): \_\_\_\_\_ Name of the Block: \_\_\_\_\_

| A  | Personal Information   |  |  |
|----|--|--|--|
| 1  | Full Name of the Applicant   |  | <i>Paste recent size colour photograph</i> |
| 2  | Sex  |  |  |
| 3  | Full Name of Father/ Husband   |  |  |
| 4  | Full Name of Mother  |  |  |
| 5  | Date of Birth (DD/MM/YYYY)   |  |  |
| 6  | Age as on date of issue of notice (in Completed Years)   |  |  |
| 7  | Social Category (Please tick valid option)   | Gen ( ) / SEBC ( ) / SC ( ) / ST ( ) / Minority ( )  |  |
| 8  | Economic Category (Please tick valid option)   | Poor ( ) / EPVG ( ) / Ration Card holder ( ) / BPL ( ) / Annual Income less than Rs.60,000/- ( ) |  |
| 9  | Special Category (Please tick valid option)  | PwD ( ) / Orphan ( ) / PVTG ( )  |  |
| 10 | Current Address with name of Village, GP, Post Office, Police Station, Block, District, State, Pin   |  |  |
| 11 | Permanent Address with name of Village, GP, Post Office, Police Station, Block, District, State, Pin |  |  |
| 12 | Telephone/mobile Number (Mandatory)  |  |  |
| 13 | Alternate telephone/mobile Number (Optional)   |  |  |
| 14 | Email ID (optional)  |  |  |

**B. Educational Qualification** (*Self attested photocopy of Certificates & Mark sheets to be attached*)



| Sl. No.   | Degree/Diploma/<br>Certificate Course/<br>Any other | Total Marks | Total Marks secured | % of marks secured | Institution / College/ School | University / Board | Year of Passing |
|---|---|-------------|---------------------|--------------------|-------------------------------|--------------------|-----------------|
| 1   | 10 <sup>th</sup> Class                              |             |                     |                    |                               |                    |                 |
| 2   | 12 <sup>th</sup> / Intermediate/<br>+2              |             |                     |                    |                               |                    |                 |
| 3   | Graduation<br>(Specify)/ +3                         |             |                     |                    |                               |                    |                 |
| 4   | Post Graduate<br>(Specify)                          |             |                     |                    |                               |                    |                 |
| <b>Any other qualification, ITI/additional degree, diploma/ degree/ certificate course. If Yes, mention below</b> |   |             |                     |                    |                               |                    |                 |
| 5   |   |             |                     |                    |                               |                    |                 |
| 6   |   |             |                     |                    |                               |                    |                 |
| 7   |   |             |                     |                    |                               |                    |                 |
| 8   |   |             |                     |                    |                               |                    |                 |

| <b>C. Experience (Self attested photocopy of experience certificates and relevant documents to be attached)</b> |                    |   |                |              |                                 |
|---|--------------------|---|----------------|--------------|---------------------------------|
| Sl. No.   | Area of Experience | Name and address of SHG/ CLF/ GPLF/Department/ Organization/ govt. recognized Institution associated with | PERIOD         |              | Total Period (In Years/ Months) |
|   |                    |   | From (MM/YYYY) | To (MM/YYYY) |                                 |
| 1   |                    |   |                |              |                                 |
| 2   |                    |   |                |              |                                 |
| 3   |                    |   |                |              |                                 |
| 4   |                    |   |                |              |                                 |

| D. | Language Proficiency (Put Tick Mark $\checkmark$ in appropriate column) |
|----|---|
|    |   |

*Handwritten signature*



| Sl. No. | Language            | Read | Write | Speak |
|---------|---------------------|------|-------|-------|
| 1       | Odia                |      |       |       |
| 2       | Hindi               |      |       |       |
| 3       | English             |      |       |       |
| 4       | Any Other (Specify) |      |       |       |

Documents attached (refer to *Annexure-III* to know type of documents to be attached)

| Sl No. | Name of Document attached | Sl No. | Name of Document attached |
|--------|---------------------------|--------|---------------------------|
| 1      |                           | 7      |                           |
| 2      |                           | 8      |                           |
| 3      |                           | 9      |                           |
| 4      |                           | 10     |                           |
| 5      |                           | 11     |                           |
| 6      |                           | 12     |                           |


**Declaration**

*I do hereby, declare that information submitted by me is true to the best of my knowledge. I understand that, in case of false information, my candidature will be rejected at any given point of time and I am also liable for appropriate action.*

Date

Place

Signature

Cut from Here 

**Acknowledgement**

Application No: \_\_\_\_\_

I Ms/Smt..... acknowledge receipt of application of  
Ms/Smt..... for the position of ..... for  
..... CLF ..... GPLF.....  
under.....BLF on date..... at .....

**Full Name & Signature of receiver**

**With seal and stamp**



**ANNEXURE-III CHECKLIST OF DOCUMENTS TO BE SUBMITTED**

| Sl. No. | Parameter  | Self-Attested Documents to be submitted  |
|---------|--|--|
| a.      | b.   | c.   |
| 1.      | Address Proof  | Resident Certificate/Aadhaar Card/ Voter ID/ Electricity/ Water Bill/ Ration Card  |
| 2.      | Identity Proof                                       | Aadhaar Card/Voter ID/PAN Card/ Driving License/ Ration Card with Photo  |
| 3.      | Age Proof  | Birth Certificate/ 10 <sup>th</sup> class certificate  |
| 4.      | Educational Qualification                            | Mark sheet/ Board Certificate/ Diploma/Degree Certificate/ Post graduate certificate/ Any other qualification certificate from approved recognized institution   |
| 5.      | SHG Member   | Letter from President/Secretary of concerned SHG   |
| 6.      | Social Category (SC/ST/Minority)                     | Caste Certificate  |
| 7.      | Economic Category (Poor/EPVG (SECC 2011 Census data) | PIP Under OLM as per SECC-2011   |
| 8.      | Ration card holder                                   | Ration card issued by Competent Authority  |
| 9.      | BPL  | BPL card issued by Competent Authority   |
| 10.     | Annual Income less than Rs. 60,000/                  | Income Certificate issued by Tahasildar  |
| 11.     | Person with Disability                               | Disability Certificate from concerned government department  |
| 12.     | Orphan   | Orphan certificate from concerned Tahasildar (staying at home)/ DCPO (staying at child care institution)   |
| 13.     | PVTG   | Caste Certificate  |
| 14.     | Community Cadre in intensive village/ GP under OLM   | Letter from concerned CLF President/Secretary (in case of CRP-CM), GPLF President/Secretary in case of MBK, Bank Mitra, CRP-EP mentioning period for which candidate is/was engaged in intensive village/ GP under OLM |
| 15.     | CRP for mobilization round/ Senior CRP under OLM     | Letter/ Certificate from BMMU/DMMU/SMMU, OLM mentioning the period of engagement   |