

जवाहरलाल नेहरू विश्वविद्यालय

सं. प्रशा.।/अनुकंपा.अप्वा/2021-22/

दिनांकः 13 जनवरी 2023

<u>परिपत्र</u>

विषयः वर्ष 2021 और 2022 के लिए चिहिनत रिक्तियों हेतु अनुकंपा आधार पर नियुक्ति हेतु आवेदन आमंत्रित करने के संबंध में।

दिनांकः 31 दिसंबर 2022 से पहले सेवा के दौरान दिवंगत हुए विश्वविद्यालय कर्मचारियों के आश्रित पारिवारिक सदस्यों से आवेदन आमंत्रित किए जाते हैं। सभी संबंधित को सलाह दी जाती है कि वे कार्मिक एवं प्रशिक्षण विभाग (डीओपीटी) के दिशानिर्देशों के अनुसार वर्ष 2021-2022 के लिए चिह्नित रिक्तियों के लिए अनुकंपा आधार पर नियुक्ति हेतु विचार करने के लिए संलग्न फार्मेट (प्रति संलग्न) में अपने आवेदन भेजें।

विधिवत् प्रमाणित आवश्यक अनुलग्नकों सहित आवेदन **दिनांकः 13.02.2023 तक** उप कुलसचिव (प्रशासन) के पास भेज दिए जाएं।

ऐसे आश्रित जिन्होंने अनुकंपा आधार पर नियुक्ति हेतु पहले आवेदन किया था, परन्तु उनकी नियुक्ति नहीं हो पाई, यदि वे आवेदन करना चाहें तो, उन्हें अपने मामले पर विचारार्थ पुनः आवेदन करना होगा।

इसे सक्षम प्राधिकारी के अनुमोदन से जारी किया जाता है।

(गगनदीप सिंह)

उप क्लसचिव (प्रशासन)

संलग्नः यथोपरि

प्रतिलिपि:-

- 1. कुलपति के विशेष कार्य अधिकारी
- 2. कुलदेशिक-।/कुलदेशिक-॥/कुलसचिव, वित्त अधिकारी के निजी सचिव।
- 3. डीन (छात्र)/अध्ययन संस्थानों के डीन
- 4. सभी केन्द्राध्यक्ष
- 5. सभी छात्रावासों के वार्डन
- 6. शाखा प्रभारी
- 7. निदेशक, सीआईएसः इंट्रानेट पोर्टल तथा ई-ऑफिस पर अपलोड करने हेत्।
- 8. सभी सूचना पट्ट/गार्ड फाइल
- 9. सभी संबंधित

JAWAHARLAL NEHRU UNIVERSITY NEW DELHI 110067

NO. Admn. 1/Comp. Appt./2021-2022/

13th January, 2023

CIRCULAR

Sub: Inviting applications for consideration of appointment on compassionate grounds for the Vacancies earmarked for the year 2021 and 2022- Reg.

Applications are invited from the dependent family members of the employees of the University, who died in harness before 31st December, 2022. All concerned are advised to submit their applications in the enclosed format (copy enclosed) in order to be considered for appointment under compassionate grounds for the vacancies earmarked for the year 2021 and 2022 in accordance with the DoP&T guidelines.

The application, alongwith necessary enclosures duly self attested may be submitted to the Deputy Registrar (Administration) by 13.02.2023.

The dependants who had applied earlier but could not secure appointment under compassionate ground will have to apply again for consideration of their cases, if they wish so.

This issues with the approval of the Competent Authority.

(GAGANDEEP SINGH)
DEPUTY REGISTRAR
(ADMINISTRATION)

Encls: As above

Copy To,

- 1. O.S.D to Vice-Chancellor
- 2. P.S to Rector I& II, Registrar, Finance Officer
- 3. Dean of Students/ Deans of Schools
- 4. Chairpersons of Centres
- 5. Wardens of all hostels
- 6. Branch In-Charges
- 7. Director (CIS): for uploading in intranet portal/e-office.
- 8. All Notice Boards/ Guard File
- 9. All concerned

To,	Date:					
The Deputy Registrar Administration Jawaharlal Nehru University New Delhi-110067						
	Ref: University circular No:					
Resp	pected Sir,					
	In response to your circular, I	, dependant of Late Shri/Smt				
who	expired onseek to apply for a			ose		
	with the following documents:					
1	Form Part -A					
2	Copy of the Death Certificate of the Deceased Employee					
3	Copy of the Family Pension order issued by the University					
4	No Objection Certificate from each dependent member.					
5	Photocopies of documentary proof of date of birth, Educational Qualifications/ School Leaving Certificates/ Birth certificate in respect of applicant.					
6	Three Passport size Photographs of the applicants					
7	Caste Certificate (in case of SC/ST/ OBC category).					
8	Disability Certificate issued by the Medical Board constituted by the Central or State Govt. (in case of persons with Disability category).					
9	Copy of Present Residential proof.					
10	A * * * * * * * * * * * * * * * * * * *					
11	Copy of registered documents of property(ies) & electricity bill / water bill/ property tax					
12	Copy of electricity bill / water bill in case of unregistered properties.					
Encls: As stated. Yours faithfully						
Signature of the Widow/Widower / (or) Right Thumb Impression Date: Place: Date: Place: Nignature of the Applicant Name of the Applicant: Date: Place: New Delhi						

PROFORMA REGARDING EMPLOYMENT OF DEPENDANTS OF UNIVERSITY SERVANTS DYING IN HARNESS / RETIRED ON INVALID PENSION

PART – A

I. Pa	rticulars of the University Employee (Decease	ed / Retired on medical grounds)
(a)	Name of the University Employee (Deceased / Retired on medical grounds)	
(b)	Designation & Id No. of the Employee	
(c)	Whether it is MTS (erstwhile Group 'D') or not?	
(d)	Date of birth of the employee	
(e)	Date of death / retirement on medical grounds	
(f)	Total length of service rendered	
(g)	Whether permanent or temporary	
(h)	Whether belonging to SC / ST / OBC / PWD	
(i)	Cause of demise	

II. Details of claimant for appointment on compassionate grounds					
a)	Name of the Applicant (in capital letters)	Passport Size Colour Photograph of the Candidate			
b)	His/Her relationship with the employee				
c)	Date of birth				
d)	Educational qualifications				
e)	Whether any other dependent has been appointed on compassionate grounds				

III. Particulars of total assets left including amount of:					
(a)	Family Pension				
(b)	Death cum Retirement (D.C.R.) Gratuity				
(c)	General Provident Fund (G.P.F.)				
(d)	L.I.C. Policies (including PLI)				
(e)	Moveable and Immovable properties & annual income earned therefrom by the family.				
(f)	C.G.E Insurance amount				
(g)	Encashment of leave				
(h)	Any other assets				
	Total				
IV. H	rief particular of liabilities, if any.				

IV. Particulars of all dependent family members of the employee (if some are employed, their income and whether they are living together or separately) Relationship Employed or not if employed particulars Name(s) with the Govt. Address S.No. Age of employment and emoluments) servant (1) (2) (3) (4) (5) (6)

VI. <u>DECLARATION / UNDERTAKING</u>

- 1. I hereby declare that the facts given by me above are true to the best of my knowledge, correct. If any of the facts herein mentioned are found to be incorrect or false at the future date, my services may be terminated.
- 2. I hereby also declare that I shall maintain properly the other family members who were dependent on the Government servant mentioned against I(a) of Part-A of this form and in case it is proved at any time that the said family members are being neglected or not being properly maintained by me, my appointment may be terminated.

Signature of the Applicant
Name of the Applicant: Address: Mobile No: Email ID:
Date : Place :

(Certificate from the Permanent In-service University Employee)

certify that I have known the family of late Shri/Smt intimately for the past years. To my knowledge, none in the family has been appointed in Jawaharlal Nehru University on compassionate grounds so far. The family of (late) Shri /Smt is presently residing at Signature of the Permanent in-service University Employee
Nehru University on compassionate grounds so far. The family of (late) Shri /Smt is presently residing at Signature of the Permanent in-service
The family of (late) Shri /Smt is presently residing at Signature of the Permanent in-service
Signature of the Permanent in-service
Signature of the Permanent in-service
<u> </u>
<u> </u>
University Employee
Date: Name:
Place: Designation:
Id. No.:
Residential Address:
Contact Phone No.
Contact Phone No.

NO OBJECTION CERTIFICATE

(To be submitted by each dependant member, separately)

I	dependant family member / legal heir of Late_			eDesignation						
	Id. No	Jawaharlal	Nel	hru	Univers	sity,	have	no	objection	if
appointment	t on compassionate grou	nds is given t	to Sri	/Smt	./Kum					
son/wife/ da	aughter of late Sri	I s	shall	not	stake	clain	n for	app	pointment	on
compassiona	ate grounds.									
					Signature of the Family Member					
					Name:					
Date:					Phone	No. :				