



दिल्ली सरकार

कार्यालय प्रमुख अभियंता, लो0नि0वि0

12वां तल, बहु-मंजिला भवन, इन्द्रप्रस्थ संपदा, नई दिल्ली-110002

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तारका



संख्या: 10(1)/प्रमुख अभि./निदेशक/लोनिवि/2018/ 5968

दिनांक: 24/5/2018

सेवा में

प्रधान मुख्य अभियंता (अनु.),
लोनिवि, एमएसओ भवन,
नई दिल्ली।

प्रधान मुख्य अभियंता (परि.),
लोनिवि, एमएसओ भवन,
नई दिल्ली।

विषय:- Comprehensive Test on manual of office procedure (MOP)
for 2018

संदर्भ:-

उपरोक्त विषय पर प्राप्त पत्र की प्रतिलिपि संलग्न की जा रही है। आपसे अनुरोध है कि उपरोक्त टैस्ट हेतु इच्छुक अधिकारियों के नामांकन निर्धारित प्रपत्र पर भरकर 30-5-18 तक सीधे प्रशासनिक सुधार विभाग को भिजवाएँ।

संलग्न: उपरोक्तानुसार।

(सुभाषनी)
सहायक प्रशासनिक अधिकारी

✓ प्रतिलिपि:- लोनिवि वैबसाईट।

(सुभाषनी)
सहायक प्रशासनिक अधिकारी

GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI
ADMINISTRATIVE REFORMS DEPARTMENT
7TH LEVEL, C-WING, DELHI SECRETARIAT, I.P.ESTATE, NEW DELHI
EMAIL: arupdate@nic.in

Dated: 23/08/18

No.F.15/01/2018/AR/ 14362-72

To,

- 1 All Pr. Secretaries/Secretaries/Head of Departments,
Govt. of NCT of Delhi,
Delhi/New Delhi.
- 2 District & Session Judges,
Tis Hazari/Karkardooma/Rohini/Dwarka/Saket/Patalia House Courts,
Delhi/New Delhi.
- 3 All M.D's/Chairman of Local/Autonomous Bodies,
Undertakings/Corporations,
Govt. of NCT of Delhi, Delhi/New Delhi.
- 4 The Commissioners of Municipal Corporations of Delhi,
East/North/South Districts,
Delhi/New Delhi.
- 5 The Commissioner of Police,
Delhi Police,
Delhi/New Delhi.
- 6 The Chairperson /CEO
NDMC/ DJB,
Delhi/New Delhi.

For wide
circulation in all
Sections/Units

Sub: **Comprehensive test on Manual of Office Procedure (MOP) for 2018.**

Sir /Madam,

With a view to encourage the officials /officers including Group D staff to get acquainted with the provisions of "Manual of Office Procedure" and use the knowledge so gained in their day-to-day working, a scheme of "Self Learning" of MOP – Test was introduced in the year 1991.

2. Under this scheme, all the desirous officials/ officers including Group-D can participate in the said test working in the Departments of Government of NCT of Delhi, District Judiciary, Delhi Police, Municipal Corporation/council and subordinate Offices/ Undertakings & Local Bodies functioning under Govt. of NCT of Delhi.

3. The test would be confined to the provisions of "Manual of Office Procedure Test" (MOP) and contain 100 objective/subjective type questions. The duration of the test would be 1½ hour and separate papers would be set out for each category, i.e. C for LDC/Jr. Asstt/Group-D, B for UDC/Sr. Asstt/Gr.II or equivalent and A for Gr.I/S.O. and their equivalents and above.

4. Each incumbent who secures 50% and above marks would be given a Certificate and cash award on the basis of his/her performance in the test at the following rates: -

Slab of Marks	Amount of Prize
80% and above	1,500/-
70% to 79%	1,000/-
60% to 69%	800/-
50% to 59%	600/-

प्रमुख अधिकारी
आवती सं. 11420
दिनांक 14/9/18
प्रमुख अभियन्ता
दिनांक (कार्य एवं स्था.)
(संख्या) 99(10)-1
17/9/18

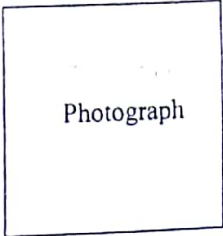
GA
17/9
18/9/18

Contd...2/-

APPLICATION FORM

MANUAL OF OFFICE PROCEDURE TEST- 2018

(Note: Incomplete application forms would be rejected)



Roll Number

(To be allotted by A.R. Department)

1. Name in capital letters (in English)

2. Father's/Husband's Name

3. Sex Male Female

4. Designation

5. Date since when holding the post - - (dd-mm-yyyy)

6. Pay Level in pay matrix (Don't mention basic pay)

7. Category for which eligible (Please tick mark the category)

Gr.I/SO/Supdt. or equivalent and above (A)	UDC/Sr.Asstt/Gr.II/Assistant or equivalent (B)	LDC/Jr. Asstt/Group-D or equivalent (C)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Department

9. Section/Branch/Unit

10. Complete Office address with Pin code

11. Complete Residential Address with Pin code

12. Contact Numbers

Office	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Residence	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mobile	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

13. Bank Details (Please enclose copy of cancelled cheque):

Name of Bank _____

Branch Address _____

Account No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
IFSC Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MICR Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(Without Bank details, application will be rejected)

Certified that the above information is correct to the best of my knowledge and belief. I understand that the information furnished above, if found suppressed / incorrect at any stage, will attract disciplinary proceedings against me. I also undertake that the knowledge gained would be properly utilized for office use.

Signature of the Applicant