

Govt. of West Bengal

Directorate of Vocational Education & Training
Action Area: III, Plot: B-7, New Town, Rajarhat, Kolkata-700160

E-mail: wbdvet@gmail.com

Memo No. 157-VET/2022-23

Date:26.08.2022

MEMORANDUM

Pursuant to the letter No. A-59-PSC(A) dated the 14th June, 2022 of Public service Commission, West Bengal followed by G.O. No. I/210755/2022 dt 01.08.2022 of TET&SD Department, each of the hitherto 4(four) qualified candidates, as given in the Table-1 below, whose names have been recommended by the Public Service Commission, West Bengal for appointment to the post of Lower Division Clerk and Cashier through Clerkship Examination, 2019 in the Directorate of Vocational Education and Training against their Advt. No. 05/2019 are hereby requested to report physically to this Directorate along with all certificates / testimonials in original, duly filled in Verification Roll Forms etc. for verification as detailed in the Table-2 below.

Table-1

Name of the posts	SI. No	Merit position	Roll No.	Name	Category	PH	Ex- SM	MSP	Recomm ended against Vacancy
LDC	1	298	0126126	ABHISHEK GOSWAMI					UR
	2	305	0126070	SUDIP MAJI					UR
	3	4242	1827789	PRABIR HALDER	SC				SC
Cashier	1	4256	0705321	RAHUL MONDAL	SC			To Males	SC

Table-2

Name of the Post (1)	Sl. No. in the PSC Recommendatio n list (2)	Date and Time	Venue (4)	General Instructions and list of documents which are to be submitted by the candidate at the time of verification (5)
1. LDC	1-3	06.09.2022; 11.30 A.M. to 2.00 P.M	Room No. 316, 3 rd Floor,	i. All Certificates/Testimonials, etc. in original and 2 sets of self-attested copies (educational documents, caste certificate, if any, certificate of
2. Cashier	1	06.09.2022; 11.30 A.M. to 2.00 P.M	Karigari Bhawan, B/7, AA – III, New Town, Kolkata - 700160	proof of MSP/Ex-SM/PD category, two copies of same photograph as furnished in the application form of PSC); ii. An Accepting letter (as per format to be downloaded from the official website of the department of TET&SD, www.wbtetsd.gov.in or from the personal communication via email id furnished in PSC application form and by speed post to the address furnished in PSC application form) mentioning A) His/ Her Communication Number and the name and address of concerned office of DIB / Police Commissionerate. B) Whether Police Verification/ Medical Examination has been done previously:

,		a) if yes, give details of current employer from whom the PVR is to be collected; b) if no, submit 2 (two) sets of duly filled in Verification Roll Forms in original (the blank VR Form is to be downloaded from the official website of the department of TET&SD, www.wbtetsd.gov.in or from the personal
		www.wbtetsd.gov.in or from the personal communication via email id furnished in PSC application form and by speed post to the address furnished in PSC application form). Self-attested photocopy of proof of date of birth (Madhyamik or equivalent certificate), Caste Certificate for the candidates belong to SC/ST/OBC-A/OBC-B category, NCL (Non Creamy Layer) certificate in current date for OBC candidate and certificate as proof of MSP/Ex-SM/PD category should be enclosed with each of the VR form. c). Special attention needs to be given while filling up verification roll so that no point is left blank.

The documents which are to be submitted by the candidate are mentioned in the column (5) of the Table-2 above.

The candidates are also requested to follow the health protocol such as maintaining social distancing, wearing mask and sanitization of hands during verification.

Enclo: 1. Blank Verification Roll Form

2. Accepting Letter Format

Director of Vocational Education & Training
West Bengal

Verification Roll

Passport size recent colour photograph

1	Name in full (in block assistate) and 12		
1.	Name in full (in block capitals) with aliases,	Surname	Name
	if any. (Please indicate if you have added or		
	dropped, at any stage, any part of your name		
	or surname).		
2.	The name of the post and service applied for		
3.	Present address in full (i.e. village, thana and		
	district or house number, lane/street and road,		
	PIN)		
4.	(a) Home address in full (i.e. village,		
	thana and district or house number,		
	lane/street and road, PIN)		
	rane/street and road, FTN)		
	(b) If originally a resident of Pakistan,		
	Bangaladesh, Nepal or any other		
	country, the address in that		
	Dominion or migration to Indian		
	Union		

5. Particulars of places where you have resided for more than one year during the preceding five years:

From	То	Residential address in full (i.e. village, thana and district or house number, lane/street and road, PIN)		

6. (a) Father's name in full with aliases, if any	(a
(b) Present postal address (if dead give last address)	(b
(c) Permanent home address	(c
(d) Profession	(d

(e) If in service, give designation and official	address	(e)			
7. (i) Nationality of -					
(a) Father		(a)			
(b) Mother		(b)			
(c) Husband		(c)			
(d) Wife		(d)			
8. (a) Exact da	ate of birth				
	a)				
[To be supported by Birth Registration Certificate/Admit Card of West Bengal Board of Secondary Education/any other recognised Board]					
b) Present age	(b)				
c) Age of Matriculation/School Final	(c)				
9. (a) Place of birth, district and State in which is	t is				
situated		(a)			
(b) District and State to which you belong		(b)10.(a) State	your religio	on :	
tribes/OBC, Answer "Yes"" or "No" and answeris "Yes" state the name thereof [Copy of certificate to be attached] 11. Educational qualification showing		: education wit	h years ir	ı schools and c	olleges:
Name of School/College with full address	Date/Ye	ar of entering	Date/Y	ear of leaving	Examination passed
12. If you have at any time been emplo	oyed give	details:			
Designation of post held or description of		Period		Full	addwaga of the
work		. VIIOU		Full address of the Office/Firm/Institution and reasons for leaving previous service	
	and the second				

13. Have you ever been convicted by a court of any offence or charge-sheeted by the police in connection with any criminal proceeding? If so,

	the full particularsof the case should be given.	
14.	Names of two responsible persons of your locality or two referees to whom you are known	: (1)(2)
		d complete to the best of my knowledge and belief. I am not aware r employment under Government. I understand that submission of
Date	<u></u>	Signature of Candidate
Plac	e	

(Certificate to be signed by a Gazetted Officer or Member of Legislature or other authority prescribed by the appointing authority)

Certified that I have known	
Shri/Shrimati	,
son/daughter of Shriyears months and that to the befurnished by him/her are correct.	est of my knowledge and belief the particulars
Date	Signature
Place	Designation or status and address

Directorate of Vocational Education & Training

Karigari BhawanB/7, Action Area-III, New Town, Rajarhat, Kolkata-160.

[Signature and designation of the Issuing Officer andthe name of the office with full address and date]

FORMAT FOR LETTER OF ACCEPTANCE

From:	Name of Candidate with address with Pin code	Self-attested Passport size recent photograph
То:	Director of Technical Education & Training Karigari Bhawan (3 rd Floor) Action Area: III, Plot: B/7, New Town Rajarhat, Kolkata-700 160	
Sir,		
1.	I am accepting your offer for the post of LDC/ Cashier (Please tick the one) through Clerkship Examination -2019 against Advt. No. 05/2019 of	ne appropriate f PSC, WB.
2.	My Communication Number:	
3.	Name and address of office of DIB (District Intelligence Brance Comissonerate with Pin code: (If Police Verification not done previously	eh) / Police
D	esignation:	
N	ame of the office:	
R	oad / Street:	
V	illage / Town/ Locality:	
P.	O	
D	istrict State:	
PI	N:	
	Communication address of the Concerned Issuing Authority of Caste Ce SC/ ST/ OBC-A/ OBC-B category only)	ertificate: (For
	ame of the office:	
Re	oad / Street:	
	illage / Town/ Locality:	
	O	
Di	strict State:	
	N:	
	Communication address of the Concerned Issuing Authority for Measurement of the Concerned Issuing Authority	MSP/ EX-SM

Name of the office:
Road / Street:
Village / Town/ Locality:
P.O
District State:
PIN:
6. Communication address of the Concerned Issuing Authority of PD Category only: Designation:
Name of the office:
Road / Street:
Village / Town/ Locality:
P.O
District State:
PIN:
 Name and address of current employer (in whose case Police Verification and Medical Examination have been done previously) Designation:
Name of the office:
Road / Street:
Village / Town/ Locality:
P.O
District State:
PIN:
Name in Full (Block Capital):
Date:
(Full Signature of the Candidate) Post of LDC/ Cashier/ (Strike out the not applicable options)
Serial No & Merit Positionas per