



GOVERNMENT OF PUDUCHERRY
DEPARTMENT OF WOMEN AND CHILD DEVELOPMENT
U.T. OF PUDUCHERRY CHILD PROTECTION SOCIETY (UTPCPS),
Kamarajar salai, Opposite LIC Office, Puducherry -13. Ph.0413-2200088

NOTIFICATION

The Department of Women and Child Development / Union Territory of Puducherry Child Protection Society (UTPCPS) is inviting applications from eligible person for filing up of Member (1 Vacancy) of Child Welfare Committee ,Puducherry, as per Section 27 of Juvenile Justice (Care and Protection of Children) Act, 2015 and Rule 16 of Puducherry Juvenile Justice (Care and Protection of Children) Rules, 2017 for exercising powers and discharging the functions of the Committee in relation to Children in Need of Care and Protection (CNCP).

Details of application Format, age, essential qualifications and experience for the post of Members are available in the website. <http://www.py.gov.in> and <http://wcd.py.gov.in> . The last date for submission of applications is by 5.00pm on **13/02/2020**.

(S. YESVANTHAIYAH)
Director (DWCD)/Mem.Secy. (UTPCPS)

1. Qualification for Members of Child Welfare Committee as per Rule 16 of Puducherry Juvenile Justice (Care and Protection of Children) Rules, 2017:

Education and Qualification	A degree in child psychology or psychiatry or social work or sociology or human development or in the field of law or a retired judicial officer.
Age limit	Shall not be less than 35 years and not more than 65 years of age at the time of appointment.
Experience	Shall have at least 7 years experience in working with children in the field of education, health, or welfare activities.

Note: The appointment will be subject to the provisions under Rule 16 of Puducherry Juvenile Justice (Care and Protection of Children) Rules, 2017. The Member of the Committee shall be appointed by the Government on the recommendation of the Selection Committee under **rule 91** of these rules.

- i. This advertisement is NOT for a Government job.
- ii. The Members of the Committee shall be paid such allowance as prescribed by Government. No other pay or allowances are admissible
- iii. The person who is appointed as a Member of the Committee shall be appointed for a period up to 14.02.2021 from the date of appointment.
- iv. The application must be sent through Registered Post with Acknowledgment only on below mentioned address so as to reach it on or before **13-02-2020** in prescribed application. Please note that Applications will not be accepted in person / through courier at office.
- v. Qualified candidates shall send their applications in prescribed application along with proof of qualification and certificate of experience and other details to “**The Director (DWCD) /Member Secretary**”, **Union Territory of Puducherry Child Protection Society (UTPCPS), DWCD Complex, Opposite to LIC office, Kamarajar salai, New Saram, Puducherry-13.**
- vi. Applications received after the prescribed date and time limit will not be considered.
- vii. Help Line Number for further clarification – **0413-2200088.**

Director (DWCD)/Mem.Secy. (UTPCPS)

Cont.3/-

**APPLICATION FOR THE POST OF MEMBER IN CHILD WELFARE
COMMITTEE (CWC) IN PUDUCHERRY**

Name of the position for which applied:

1. Name in Block letters :
2. Father/Husband's Name :
3. Date of birth :
4. Age (as on 01- 02- 2020) :
5. Sex : Male Female
6. Nativity :
7. Nationality :
8. Address for communication :

9. Telephone No & Mobile No :
10. Email ID :
11. Educational qualification(with self attested
copies of certificates) :
12. Field of achievement :

13. A brief life – sketch of the individual including
press clippings / certificates etc :
14. The performance of the individual adjudged as
exceptional achievement in the field of Child
Welfare Activities :
15. No Objection Certificate from Police Station
(has no past record of violation of human rights
or child rights) :
16. Any other relevant information :

Affix
Recent
Passport
Size
Photograph

DECLARATION

I hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and if any of the above given information being found false or incorrect or ineligible and detected before or after exam/interview I hereby convey my consent for cancellation of my candidature. Further I declare that, I have gone through all the terms and conditions of appointment I will abide the same.

Place:

Date:

Signature of the Candidate