

## कोलकाता पत्तन न्यास KOLKATA PORT TRUST श्रम एवं औ. सं. विभाग LABOUR & IR DIVISION 15, स्ट्रांड रोड (7वां तल) 15, STRAND ROAD (7<sup>th</sup> FLOOR) कोलकाता- 700 001 KOLKATA - 700 001

No. Lab/Scholarship/Genl/178/P-II/

Dated :

Secretary /DMD/ CE/ CMO/ TM/ FA&CAO / CME/ Materials Manager/ Jt. Director(P&R)/ Estate Manager / CHE (I/C) / Chief Law Officer (I/C)

Subject: Application for grant of Scholarship.

Applications are invited in the prescribed proforma (specimen enclosed) from KoPT employees for grant of Scholarship to their eligible wards, who have secured admission in either of the following courses in the year 2018 through All-India / State competitive entrance examination:-

- (a) Engineering degree course (including Architecture) in IITs, NITs, **Government** Engineering Colleges and Universities recognized by UGC;
- (b) Medical degree course (including Dental Surgery) in **Government** Medical Colleges, Universities recognized by UGC, AIIMS, New Delhi and Christian Medical College, Vellore;
- (c) Marine Engineering course in India Maritime University; and
- (d) Post Graduate (IIM) Diploma in Management in Indian Institute of Management through CAT.

2. It is, therefore, requested to circulate this circular among the officers/staff of your Department/Division and the application as per prescribed proforma received from officers/staff shall be forwarded, duly superscribing on the envelope. "Application for Scholarship", to the Labour Adviser & Industrial Relations Officer / Sr. P.O., KoPT, 15, Strand Road, Kolkata-700001.

Contd.....2

3. The last date to receive the application is **26<sup>th</sup> November**, **2018**. Incomplete application or application received after the due date shall not be considered.

4. You are requested to give this circular wide publicity among the officers and employees under your control and forward the applications of the concerned employees positively within the stipulated period.

Enclo: As stated.

(पी॰के. चट्टोपाध्याय) ( P. K. Chattopadhyay) श्रम सलाहकार एवं औ.स॰अ॰

#### / वरिष्ठ कार्मिकअधिकारी

Labour Adviser & Industrial Relations Officer / Sr. Personnel Officer

Copy alongwith enclosure to PA to Chief Vigilance Officer for kind information of Chief Vigilance Officer. It is requested to give wide circulation among the employees of Vigilance Department.

Copy alongwith enclosure is forwarded to General Manager (Marine)/ General Manager (M&S) / General Manager (Traffic) / General Manager (Finance) (I/C) / General Manager (Engineering) (I/C) / Sr. Dy. Manager (Admn.) / Sr. Dy. Manager (MM) / Manager (MO) (I/C) / Medical Superintendent / Sr. Dy. Manager (I&CF) / Sr. Dy. Manager (Sh & Ch.) / Sr. Dy. Manager (Finance)/ Sr. Dy. Manager (P&IR) / Sr. Dy. Manager (Rly) / Dy. Chief Vigilance Officer,HDC for information and necessary action please.

Enclo. As stated

Copy to PO for information and necessary action please.

Enclo: As stated

# <u>कोलकाता पत्तन न्यास</u>

## **KOLKATA PORT TRUST**

# इंजीनियरिंग, मेडिकल, मेरिन इंजीनियरिंग एवं मैनेजमेंट में अध्यन जारी रखने हेतु <u>पत्तन कर्मचारियों के आश्रितों को छात्र-वृत्ति ।</u>

### <u>आवेदन-पत्र</u>

| 01.      | <u>कर्मचारी का विवरण /Particulars of the employ</u>              | <u>ee :</u>    |
|----------|--|----------------|
| (i)      | नाम/Name   | :              |
| (ii)     | पदनाम/Designation  | :              |
| (iii)    | अनुभाग/Section   | :              |
| (iv)     | विभाग/Department   | :              |
| (v)      | कार्यालय का पता/Office Address :                                 |                |
| (vi)     | आवासीय पता/Residential Address                                   | :              |
| (vii)    | सेवा निवृति/Date of Retirement                                   | :              |
| (viii)   | दुरभाष/मोबाईल नं. /Telephone/Mobile No.                          | :              |
| 02.      | <u>आश्रित का विवरण,  जिसके लिए आवेदन किया गय</u>                 | <u>। है /</u>  |
|          | Particulars of the ward for whom the applica                     | tion is made : |
| (i)      | नाम/ Name  | :              |
| (ii)     | कर्मचारी के साथ उसका संबंध/His/Her relation                      |                |
|          | with the employee  | :              |
| (111)    | उच्चतर माध्यमिक अथवा समकक्ष परीक्षा पास                          |                |
|          | करने का वर्ष/Year of passing the Higher                          |                |
|          | Secondary or its equivalent examination.                         | :              |
|          | ( <u>अंक पत्र की अनुप्रमाणित प्रति संलग्न) की जाए ।</u>          |                |
|          | (Attested copy of the Mark Sheet to be attac                     | hed)           |
| (IV)     | उत्तीर्ण ज्वाईंट इन्ट्रेन्स परीक्षा का नाम/                      | :              |
|          | Name of the All India/Stat Joint Entrance                        |                |
| <i>6</i> | Examination Passed.  |                |
| (V)      | परीक्षा - वर्ष /Year of examination                              | :              |
| (VI)     | ज्वाईंट इन्ट्रेन्स परीक्षा का प्रवेश पत्र/Admit card             | :              |
|          | of the Joint Entrance Examination                                |                |
|          | (अनुप्रमाणित प्रति संलग्न की जाए)/                               |                |
|          | (Attested copy only to be attached)                              |                |
| 03.      | <u>पाठ्यक्रम का विवरण जिसके लिए छात्र-वृत्ति मांगी जा रही है</u> |                |
|          | Particulars of the course for which scholarsh                    |                |
| (i)      | कर्मचारी के आश्रित द्वारा दाखिला लिए गए कालेज व                  | का नाम :       |
|          | तथा संबद्ध विश्वविद्यालय का नाम/Name of the                      | :              |
|          | College and the University to which it is                        |                |
|          | Affiliated, in Which the ward has secured admission.             |                |
| (ii)     | यागाडाजा.<br>पाठ्यक्रम का नाम/Name of the Course                 |                |
| (11)     | पाठ्यक्रम की अवधि अर्थात/Duration of the :                       | •              |
| ()       | noaver in state state Duration of the .                          |                |

course i.e.

- क. से प्रारंभ/ A. Commencing from
- ख. को समाप्त/ B. Ending on
- ग. पाठ्यक्रम के दौरान प्रत्येक सत्र/ वर्ष में होने वाली परीक्षा की संभावित तिथि/ Probable date (s) of examination in each Semester/year throughout in course.

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- (IV) दी जाने वाली उपाधि/Degree to be awarded :
- (V) संस्था के प्रधान/विभागाध्यक्ष का नाम,पदनाम : तथा कार्यालय का पता, जिससे पत्र व्यवहार किया जाए/Name of the Head of Institution/Head of Department (with the designation and official Address) with whom correspondence to be made
  (VI) कालेज में अनुक्रमांक तथा वर्ग का नाम :
- (VI) कालज में अनुक्रमांक तथा वर्ग का नाम Roll No. in the College and the name of the Section

#### <u>आवेदक का पूरा हस्ताक्षर/Signature in full of the Applicant</u>

- वि. द्र. : आवेदन के साथ संलग्न प्रमाण-पत्र की प्राप्ति कोलकाता पत्तन न्यास के अधिकारी द्वारा उनके मुहर सहित अनुप्रमाणित की जाए ।
- N.B. : Copies of the certificate mentioned herein to be attested by the Head of the Institution to Which the ward has been admitted or any Class – I Officer of KoPT under his seal.

मैं श्री/श्रीमती ...... उपरोक्त पुत्र, पुत्री का पिता/माता, ईंजीनियरिंग, मेडिकल, मेरिन ईंजीनियरिंग एवं मैनेजमेंट में अध्ययन जारी रखने हेतु कोलकाता पत्तन न्यास कर्मचारियों के आश्रितों को छात्रवृति दिए जाने संबंध में दिशा-निर्देशों से अवगत हूँ, तथा उसका पालन करुंगा। I, Shri/Smt. ...... parent of my above named son/daughter have gone through the guidelines for awarding of scholarship to ward of KoPT employees for pursuing studies in Engineering, Medcial, Marine Engineering, Management and state that I shall abide by the same.

दिनांक/Date :

आवेदक का पुरा हस्ताक्षर/Signature in full of the Applicant

सं./No.

दिनांक/Date :

| श्री/श्रीमती                              | का उपरोक्त आवेदन अनुलग्नक सहित                   |
|---|--|
| अग्रेषित है । आवेदन पत्र के मद सं । के अं | तर्गत उल्लेखित विवरण सही प्रमाणित किया जाता है । |
| The above application of Sh               | ri/Smt   |

is forwarded along with the enclosures. The particulars under item no. 1 of the Application Forms are certified as correct.

विभागाध्यक्ष / Head of the Department

### (श्रम विभाग द्वारा भरा जाएगा)/(To be filled up by the Labour Department)

पंजीकरण संख्या / Registration No.

दिनांक / Date

केओपीटी कर्मचारियों के आश्रितों को छात्रवत्ति दिए जाने हेतु समिति का आदेश :

Order of the Committee for awarding of Scholarship to the wards of KoPT employees:

छात्रवत्ति के भुगतान का विवरण / Particulars of disbursement f scholarship

श्रम सलाहकार एवं औद्योगिक संपर्क अधिकारी Labour Adviser & Industrial Relations Officer