

Press News

Department of Social Defence, Mission Vatsalya, **Child Welfare Committee/Juvenile Justice Board, Theni** is running under headed by District Collector. As per instruction of the District Collector below vacancies are to be filled on one year contract basis. So, Application is invited from eligible candidates to submit their application within 15 days from advertisement in news paper for direct recruitment to the following posts.

S.No.	Name of the Post	No. of Vacancies	Qualification & Age Limit	Scale of Pay
1.	Assistant Cum Data Entry Operator	1	1) 12th pass from a recognized Board/ Equivalent Board 2) Diploma / Certificate in Computers. 3) Weightage for work experience candidate 4) Having certificate in Type writing both Lower & Higher 5) Maximum age limit 42 years	Rs. 11,916/- (Consolidated)

Eligible candidate can download an application through Theni district website as <https://theni.nic.in/> and also instructed to the candidates to submit their application along with self attested copy of testimonial documents in the below address within 15 days when published from **05-01-2024 to 19-01-2024 at 5.45PM.**

Address:

District Child Protection Officer,
District Child Protection Office,
District Block Level Officer Building – II
Collectorate Campus,
District Employment Office Upstair ,
Theni – 625 531.

Tmt. R.V. Shajeevana, I.A.S.,
District Collector,
Theni.

T.P. R. V.
04/01/2024
District Child protection Officer,
Theni

Department of Social Defence
District Child Protection Unit, Theni district

Application Form for the Post of _____

1	1 Name of the Applicant* (IN CAPITAL LETTERS)		Recent Pass-port size photograph of the applicant to be affixed
2	Name of the Father / Husband*		
3	Date of Birth *		
4	Age		
5	Religion/Caste		
6	Marital Status		
7	Address for Communication * (IN CAPITAL LETTERS)		
8	Phone Number*		
9	E-mail ID*		
10	Educational Qualification (Enclose the copy of supporting documents)*		
11	Additional Qualification		

12	Details of Working Experience (Enclose the copy of the relevant experience certificates)*				
Sl. No	Name of the organization	Designation	Years of experience		
			From (Date)	To (Date)	No. of years & months
Total					

***Mandatory**

*Incomplete application and application without relevant supporting documents will be summarily rejected without any prior information.

I _____ hereby declare that the particulars furnished by me in this application form are true to the best of my knowledge and belief. In case any information is found to be incorrect, my candidature shall liable to be rejected.

Signature of the Applicant

Date:

Place: