GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI

ADMINISTRATIVE REFORMS DEPARTMENT

7TH LEVEL, C-WING, DELHI SECRETARIAT, I.P.ESTATE, NEW DELHI

No.F.13/5/2017/AR/RTI/ Dated:

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/Patiala House Courts,

Delhi/New Delhi.

3 All M.D’s/Chairman of Local/Autonomous Bodies,

Undertakings/Corporations,

**For wide circulation in all Sections/Units**

|  |
| --- |
| **For wide circulation in all Sections/Units** |

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.

Sub: **Comprehension Test on Right to Information Act, 2005, to be held in December, 2017.**

Sir /Madam,

 With a view to encourage the officers and staff to get acquainted with the provisions of Right to Information Act, 2005 and use the knowledge so gained in their day-to-day working, a scheme of “Self Learning of RTI Act, 2005” was introduced in the year 2010.

2. Under this scheme, all officers and staff members, working in the Departments of Government of Delhi, its subordinate Offices/ Undertakings & Local Bodies can participate in the test.

3. The test would be confined to the provisions of “Right to Information Act, 2005” 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. one for LDC and their equivalent; second for UDCs, Assistants and their equivalent and the third for Superintendents and their equivalent.

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/-**

Continue on -2-

-2-

5. In addition to the above cash prizes, the candidates who secure the first three positions by securing 80% and above marks in the respective categories viz. LDC and their equivalent, UDC, Assistants and their equivalent and Superintendent and their equivalent, would also be given an additional cash award of Rs.1,500/- for standing first, Rs.1,000/- for standing second and Rs.500/- for standing third, in their respective categories.

6. The employees who secure 80% and above marks and win a cash prize of Rs.1,500/- in this test, would not be allowed to participate in the next year’s test.

7. It is requested that wide publicity may be given to this test, so that maximum number of officers / employees could be able to participate in the test.

8. It is further, observed that complaints are being received regularly from the users of RTI Act, 2005 that PIOs in various departments/organizations etc of GNCT of Delhi are not following the provisions of RTI Act, 2005 while dealing with the applications seeking information under the Act as well as the other provisions and instructions issued under RTI Act, 2005 regarding updating websites and posting information online. Therefore, a need has been felt to enhance awareness regarding various provisions of the RTI Act,2005 amongst PIOs working in the offices under the GNCT of Delhi. It is accordingly, requested to encourage and nominate PIOs working in the departments/offices under your control to participate in this test which is essentiality to enable participants for updating their knowledge about the existing provisions of RTI Act, 2005.

9 Applications from desirous candidates may please be sent to Administrative Reforms Department in the enclosed proforma (also available on the website of this Department) **latest by 30,October 2017**. The test is likely to be held in the month of December, 2017. The exact date, time and venue of the test will be intimated in due course. In case, the roll numbers for the test are not received by mid-November, concerned candidate may obtain the same from A.R. Department, in person.

Yours faithfully,

Encl: As above.

(L.R.SINGH)

DEPUTY DIRECTOR (AR)

PH.23392620

No.F.13/5/2017/AR/RTI/ Dated:

Copy forwarded for necessary action to:-

1. All Addl. Secretaries/Addl. Commissioners/Joint Secretaries/Dy. Secretaries/Under Secretaries, Govt. of NCT of Delhi, District Judiciaries, Delhi Police, Municipal Corporation/Council and Autonomous Bodies/ Undertakings of Govt. of NCT of Delhi.
2. OSD to Lt. Governor, Raj Niwas, Delhi.
3. OSD to Chief Minister/Ministers, Delhi Govt., Delhi Secretariat.
4. PS to Speaker/Leader of Opposition, Delhi Vidhan Sabha, Old Secretariat, Delhi.
5. OSD to Chief Secretary, Govt. of NCT of Delhi, Delhi Secretariat.

(L.R.SINGH)

DEPUTY DIRECTOR (AR)

PH.23392620

**Last Date for submission: 30.10.2017**

## APPLICATION FORM

## RIGHT TO INFORMATION TEST-2017

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  | **Photograph** |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| **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-yyy)*** |

**6. Pay Matrix Table level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **(As per 7 CPC)**

|  |  |  |  |
| --- | --- | --- | --- |
| **7** | **Category for which eligible****(Please tick mark the category)** |  | **LDC/Group-D and equivalent** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | **UDC/Assistant and equivalent** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | **Superintendent and equivalent and above** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **8** | **Department** |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **9** | **Section/Branch/Unit** |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **10** | **Complete Office address with Pin code** |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **11** | **Complete Residential Address with Pin code** |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **12** | **Contact Numbers** | **Office** |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Residence** |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Mobile** |  |  |  |  |  |  |  |  |  |  |

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

**Name of Bank \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Branch Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Account No.**  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **IFSC Code** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **MICR Code** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

 **(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 understand that in case my application is incomplete, the same shall be rejected and I shall be held fully responsible for the rejection. I also undertake that the knowledge gained would be properly utilized for office use.*

**Signature of the Applicant ……………………………………..**