NAME OF THE ORGANISATION: LIFE INSURANCE CORPORATION OF INDIA. NAME OF THE POST : ASSISTANT

CATEGORY

SCALE OF PAY

RESERVATION ROSTER FOR PERSONS WITH DISABILITIES (RECRUITED) AS ON 31.12.2021

4									
VH	020313 NINHIL KUMAR-07.02.2020	CTCOZO							
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or None									
HO/HH/HV									
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appointed			*	¥	오	H			
		1	Appointment		11011	I			
the person	date of Appointment	0.17.140.		C	from			No.	
and Whether	de d	S R NO	ę,	Persons with Disabilities suffering	ns with Disab	Perso	POST	and Point	recidificate and Fornt
-	Name of the Person Appoints		Category	n shirt pie tot	street identified suitable for			Cruitment and Doint	Recruitment

 $^{^{}st}$ If identified reserved, write VH/HH/OH, as the case may be, otherwise write UR.

Checked by

Manager(P&IR)

Supple

Sr.Divisional Manager

रूरं ध्व क्षेत्रीय कार्यालय L.I.C. Of India मारनीय जीवन कीया निगम (SCIST/EXSM/PWD Zunal Liaison Officer (अंतर अन्तर्जाः/भूवकः/निव्जिः) क्षेत्र र के अधिकारी

Here wast. Ons - new Rest Central Zonal Office

4 - 800 001/ Patna - 800 601 East Central Zonal Offlice

पूर्व मध्य क्षेत्रीय कार्यालय

L.I.C. Of India

भारतीय छोउन बीमा निगम

Zunal Liaison Officer (O.B.C.)

ः स्थान विद्यारी (ओः बी॰ सी॰)

Prepared by

Date: 31.12.2021

Place: Jamshedpur

^{**} Write VH,HH,OH or None, as the case may be.

^{***} VH, HH, OH stand for Visually Handicapped, Hearing Handicapped and Orthopaedically Handicapped