



**DISTRICT PROGRAMME MONITORING UNIT
(MISSION SHAKTI: SUBARNAPUR)
DSWO SECTION : COLLECTORATE**

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ଶକ୍ତି

Letter No. 2339 / Mission Shakti

Date: 09 / 11 / 2021.

**Inviting Expression of Interest for eligible WSHGs / Federation
members to act as Business Correspondence Agents in
unbanked/underbanked GPs**

Interested WSHGs/ Federation having the willingness and aptitude for delivery of door step financial services, are invited to submit their proposal before the concerned CDPO in the mentioned below format within 10 (Ten) days of this advertisement i.e by 20th November, 2021 for engagement of BCA in identified unbanked/underbanked GPs. The Block Wise Unbanked GP list annexed in Annexure-A.

N.B: Application format available at DSWO/ concerned CDPO Office & District Portal (Subarnapur.nic.in).

Yours faithfully,

District Social Welfare Officer,
Subarnapur

Memo No. 2340 Dt. 09 / 11 / 2021.

Copy forwarded to all CDPOs for information and fix the notice in the notice board of Sub-Collector, BDO, CDPO and other Block level officers and also get acknowledgement from AWW, GPLFs & BLF of the concerned Projects after supply of above.

Copy forwarded to the LDM, Subarnapur / All Bank Branches in Subarnapur district & DPM, OLM Subarnapur for information & necessary action.

Copy Submitted to the Project Director, DRDA and all BDOs of Subarnapur for information & necessary action.

Copy forwarded to the DIO, NIC, Subarnapur for information with a request to webhost in the district website for wide publication.

Copy submitted to PA to Collector for kind information of Collector & DM, Subarnapur.

District Social Welfare Officer,
Subarnapur

DPMU, Mission Shakti, Subarnapur.
O/O-DSWO, Collectorate, Subarnapur, Odisha – 767 017.
Email : dpmusub@gmail.com & dswosonepur@nic.in.

MISSION SHAKTI : SUBARNAPUR

Annexure-1

List of Unbanked GPs (Where Crick & Mortar Branch not Available)

Sl. No	District	Name of Block	Name of G.P
1		2	3
1	SUBARNAPUR	BINKA	Bankigiridi
2	SUBARNAPUR	BIRMAHARAJPUR	Bahalpadar
3	SUBARNAPUR	BIRMAHARAJPUR	Sangrampur
4	SUBARNAPUR	DUNGURIPALI	Badkarly
5	SUBARNAPUR	DUNGURIPALI	Cherupali
6	SUBARNAPUR	DUNGURIPALI	Chinajuri
7	SUBARNAPUR	DUNGURIPALI	Lingamarni
8	SUBARNAPUR	DUNGURIPALI	Sahala
9	SUBARNAPUR	DUNGURIPALI	Sargul
10	SUBARNAPUR	DUNGURIPALI	Sunapali
11	SUBARNAPUR	DUNGURIPALI	Tamamura
12	SUBARNAPUR	DUNGURIPALI	Tangarkarly
13	SUBARNAPUR	DUNGURIPALI	Kapasira
14	SUBARNAPUR	DUNGURIPALI	Karlajuri
15	SUBARNAPUR	DUNGURIPALI	Bankipali
16	SUBARNAPUR	DUNGURIPALI	Bhimitkra
17	SUBARNAPUR	DUNGURIPALI	Samaleichuan
18	SUBARNAPUR	DUNGURIPALI	Pandakital
19	SUBARNAPUR	DUNGURIPALI	Naikenpali
20	SUBARNAPUR	DUNGURIPALI	Bandhapali
21	SUBARNAPUR	SONEPUR	Kharjhura
22	SUBARNAPUR	SONEPUR	Mallikmunda
23	SUBARNAPUR	SONEPUR	Janmura
24	SUBARNAPUR	TARVA	Baghia
25	SUBARNAPUR	TARVA	Balikhamar
26	SUBARNAPUR	TARVA	Deulpadar
27	SUBARNAPUR	TARVA	Kumbharmunda
28	SUBARNAPUR	TARVA	Maraduguchha
29	SUBARNAPUR	TARVA	Sibtula
30	SUBARNAPUR	TARVA	Tullunda
31	SUBARNAPUR	Ullunda	Bisipada
32	SUBARNAPUR	Ullunda	Juarabhaunra
33	SUBARNAPUR	Ullunda	Kadodar
34	SUBARNAPUR	Ullunda	Khemaloi
35	SUBARNAPUR	Ullunda	Nimna
36	SUBARNAPUR	Ullunda	Panchamahala
37	SUBARNAPUR	Ullunda	Raxa
38	SUBARNAPUR	Ullunda	S.Patrapali
39	SUBARNAPUR	Ullunda	Lastala

Annexure – II

Name of the Position: Business Correspondent Agent

Name of the GP applied for: _____

Paste your recent
passport size
photo

SI No	Item	Particulars/ description
A.	General Information:	
	Name of the applicant (in Capital letter)	
	Father's / Husband's Name	
	Date of Birth (DD/MM/YYYY)	
	Name of the Domicile Village and GP	
	Contact Number (Mobile)	
	Email ID (if any)	
	Aadhar No. / Voter ID No.	
	PAN Number(If available)	
	Permanent Address for Communication	AT: Post: PS: PIN:
B	SHG Member Information	
	Name of the SHG	
	Date of admission to the SHG (DD/MM/YYYY)	
	Present Position held in the SHG (President/Secretary/Book keeper/Member)	
C	Educational Qualification	
	Minimum matric pass (10 th) Yes/No	
	Higher education if any (intermediate/ Degree/Master Degree/Others)	
	Computer Literate (Yes/No):	

	Computer literacy Certificate if any (DCA/PGDCA/Other):																					
	Proficiency in operating Computer/laptop/Smart phone (Yes/No):																					
	Language known (tick the appropriate)	<table border="1"> <thead> <tr> <th>Language</th> <th>Read</th> <th>Write</th> <th>Speak</th> </tr> </thead> <tbody> <tr> <td>Odiya</td> <td></td> <td></td> <td></td> </tr> <tr> <td>English</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hindi</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Other (specify)</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Language	Read	Write	Speak	Odiya				English				Hindi				Other (specify)			
Language	Read	Write	Speak																			
Odiya																						
English																						
Hindi																						
Other (specify)																						
D	Ability to meet the cost of operation of the business like security deposit, furniture & fixture, devices etc. (Yes/No)																					
	Adequate space for operating the CSP (Customer Service Point) (Yes/No)																					
E	Year of experience working with SHG/Federation/Bank (Any work experience, training/ certificate course completed on cash management/ record keeping, management and banking etc.)																					

Enclosure: List of self-attested photocopies of relevant documents

SI No.	Document Name	Whether enclosed (Yes/No)
1	Matric (10 th) Certificate	
2	Higher Education Certificate (Please specify) Intermediate (+2) Graduation (+3) Post-Graduation (PG) Any Other	
3	Aadhar with mention of concern GP / Residence Certificate / Certificate issued by Sarpanch for proof of residence	
4	Aadhar Card / Voter ID	
5	PAN Card	

6	Computer Education Certificate	
7	SHG Declaration Certificate (as to date of admission to SHG, position held etc.)	
8	Self-Declaration for proficiency in operating Computer/laptop/Smart phone	
9	Work experience as federation office bearer / executive committee member.	
10	Work experience (such as Book Keeper, Shakti Sahayika, Master trainer, SHG facilitator etc.) and training certificate (if any)	

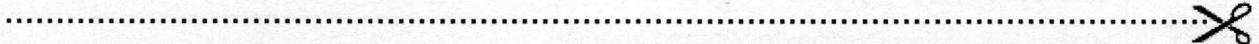
Declaration:

I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief. Further, I state that I am not currently engaged in any Government/Non-Government organization/ Local Self – Governance body as a part time /full time employee. In the event of information being found false or incorrect, or ineligibility being detected before or after the selection process, action can be taken against me.

Date:

Place:

Full Signature of the Applicant



Acknowledgement

Received the Expression of Interest from Ms. _____,
 _____ SHG, GP _____, on date _____ for
 engagement as Business Correspondent Agent in identified GP.

Signature of the CDPO/ Authorised Signatory

Date: