**IWSU FORM P-II**

**STATEMENT OF MAIN FUNCTIONS**

(Section –wise)

Name of office \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **S.NO.** | **Section** | **Functions (in brief)** |
|  |  |  |

SIU Form P-III

**CONSOLIDATED STATEMENT OF STRENGTH OF OFFICERS AND STAFF**

Name of office: As on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **SI.NO** | **Designation of post** | **Scale of pay** | **Sanctioned Strength** | **Existing strength** | **Additional demands** | **Remarks \*** |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** |
|  |  |  |  |  |  |  |
| **1** | **Group ‘A’** |  |  |  |  |  |
|  | 1. |  |  |  |  |  |
|  | 2. |  |  |  |  |  |
|  | 3. And so on |  |  |  |  |  |
| **2** | **Group ‘B’ (Gazetted)** |  |  |  |  |  |
|  | 1. |  |  |  |  |  |
|  | 2. |  |  |  |  |  |
|  | 3. And so on |  |  |  |  |  |
| **3** | **Group ‘B’ (Non Gazetted)** |  |  |  |  |  |
|  | 1. |  |  |  |  |  |
|  | 2. |  |  |  |  |  |
|  | 3 And so on |  |  |  |  |  |
| **4** | **Group ‘C’** |  |  |  |  |  |
|  | 1. |  |  |  |  |  |
|  | 2. |  |  |  |  |  |
|  | 3. And so on |  |  |  |  |  |
| **5** | **Group ‘D’** |  |  |  |  |  |
|  | 1. |  |  |  |  |  |
|  | 2. |  |  |  |  |  |
|  | 3. And so on |  |  |  |  |  |
| **6** | **TOTAL** |  |  |  |  |  |

\*The number of ad hoc posts included in the sanctioned strength may be indicated in the ‘Remarks Col.’ against the corresponding category. Categories of Posts for Creation/Addl. Demanded, if any & referred to competent Authority may be indicated.

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIU Form-P-IV**

**Work Study of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SECTION-WISE/UNIT-WIDE STAFF STRENGTH**

**Name of Section:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Sl. No.** | **Name of the post(s)** | **G.P/Level (in Rs.)** | **Sanctioned** | **Existing** | **Vacant since when** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**SIU Form P-V**

**Work Study of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Annual Frequency Date in respect of each section**

Name of the Section:\_\_\_\_\_\_\_\_\_ Period from to

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S.No.** | **Type of work/job performed during the year in the Section** | **No. of such job/works performed (item-wise) during the year** | **Time Taken for each job/work**  **(item-wise)** | **Pending work job (item-wise) during the year** | **Remarks** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

IWSU FORM B-I

**STATEMENT SHOWING MAIN JOB PERFORMED BY THE**

**INDIVIDUALS (REGULAR & OUTSOURCED)**

Name of Office: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Section:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List of function/job performed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **S. No.** | **Name & Designation of the official** | **Main jobs performed (in brief) by each official** |
|  |  |  |
|  |  | Signature:  Date : |

**IWSU FORM B-II**

**STATEMENT SHOWING THE NUMBER OF RECEIPTS IN THE SECTION**

**DURING THE LAST ONE YEAR**

Name of Office : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Section: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Period: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Month** | **Number of receipt Received** | **Reasons for abnormal increase or decrease during a particular month** |
| 1 | 2 | 3 |
| January |  |  |
| February |  |  |
| March |  |  |
| April |  |  |
| May |  |  |
| June |  |  |
| July |  |  |
| August |  |  |
| September |  |  |
| October |  |  |
| November |  |  |
| December |  |  |
| Total |  |  |
|  |  | Signature:  Date: |

**IWSU FORM B-III**

**STATEMENT SHOWING THE NUMBER OF FILES OPENED UNDER EACH MAIN SUBJECT HEAD DURING THE CALENDER YEAR**

Name of Office : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Section: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Period: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SI. No.** | **Head No.** | **Subject** | **No. of Files opened** | **Remarks if any** |
| 1 | 2 | 3 | 4 | 5 |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |

**IWSU FORM B-IV**

**STATEMENT SHOWING ORIGINAL ITEMS OF WORK/SEASONAL ITEMS OF WORK AND NOT COVERED BY DISPOSAL OF RECEIPTS (ALL WORK WHICH IS INITIATED IN THE BRANCH SUO-MOTO TO BE INDICATED HERE)**

Name of Office:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Section:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **S.No.** | **Item of work** | **Annual frequency (No. of occasions in which the activity at S.N. 2 is performed)** | **Average time per unit spent by** | | **No. of Receipts Covered, If any.** | **Remarks, if any.** |  |
| **Dealing Hand (in min.)** | **Supervisor (in Min.)** |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Certified that all original/seasonal items or work have been covered  Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |

IWSU FORM B-V

PARTICULARS OF INCOMING AND OUTGOING REPORTS AND RETURNS DURING THE YEAR

Name Of Office:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Section:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| S.No. | Description of Report Return | From what received (if received from more than one office, pl. indicate the no. of such offices for incoming returns) | Office/Section to which sent (for outgoing returns) | Periodicity i.e. weekly/fortnightly/  monthly etc. | Average time per Unit spent by | | No. of Received covered, if any. |
| Dealing Hand (in Min.) | Supervisor (in Min.) |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Signature:

Date:

IWSU FORM B-VI

**BASIC DATA IN RESPECT OF OFFICERS**

Name of Officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Section/Division/Unit Controlled: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Period of data: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A –TOURS UNDERTAKEN** | | | | | | | | | | | |
| SI. No | Place visited | | | Purpose of visit | | | Duration of tour, date and time of arrival/departure at H.Qrs. | | | |  |
| 1 |  | | |  | | |  | | | |  |
| 2 |  | | |  | | |  | | | |  |
| 3 |  | | |  | | |  | | | |  |
| 4 |  | | |  | | |  | | | |  |
| 5 |  | | |  | | |  | | | |  |
| B-LOCAL VISITS | | | | | | |  | | | | |
| Sl. No. | Office/Place visited | | | Purpose of visit | | | No. of visits in a year | | | | Time spent on each visit (including Transit time) (in Mts.) |
| 1 |  | | |  | | |  | | | |  |
| 2 |  | | |  | | |  | | | |  |
| 3 |  | | |  | | |  | | | |  |
| 4 |  | | |  | | |  | | | |  |
| 5 |  | | |  | | |  | | | |  |
| C-CONFERENCES/MEETINGS/SEMINARS ETC. | | | | | | |  | | | | |
| SL. No. | Office/Place of Conferences/Meeting/Seminars attended | | | Subject matter of Conferences/Meeting/Seminars | | | No.. of conferences/meetings/seminars | | | Time spent on each occasions (in Mts.) | |
| 1 |  | | |  | | |  | | |  | |
| 2 |  | | |  | | |  | | |  | |
| 3 |  | | |  | | |  | | |  | |
| 4 |  | | |  | | |  | | |  | |
| 5 |  | | |  | | |  | | |  | |
| D-ORIGINAL ITEMS OF WORK NOT CONNECTED WITH RECEIPTS/SEASONAL ITEMS | | | | | | | | | | | |
| 1. **Initiated at Officer’s own level** | | | | | | | | | | | |
| S.No. | | | Item of work | | | Periodicity | | Time spent on each occasions (in Mts) including travelling time, if any | | | |
| 1 | | |  | | |  | |  | | | |
| 2 | | |  | | |  | |  | | | |
| 3 | | |  | | |  | |  | | | |
| 4 | | |  | | |  | |  | | | |
| **5** | | | | | |  | |  | | | |
| **ii. Initiated at lower level and scrutinized at officer’s level** | | | | | | | | | | | |
| S.No. | | Items of work | | | Periodicity | | | | Time spent on each occasions (in Mts) | | |
| 1 | |  | | |  | | | |  | | |
| 2 | |  | | |  | | | |  | | |
| 3 | |  | | |  | | | |  | | |
| 4 | |  | | |  | | | |  | | |
| 5 | |  | | |  | | | |  | | |

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:­­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IWSU FORM B-VII

**STATEMENT OF WORK DONE BY THE LOWER DIVISION CLERK (OTHER THAN TYPISTS) DURING THE YEAR**

Ministry/Department :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Section :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Period: From\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Sl.No.** | **Items of work** | **Annual Frequency** |
| 1. | Number of Receipts diarised |  |
| 2. | (i) Recording of movement of files (No. of file movements)  (II) Recording of movement in Diary Register (No. of Diary movement) |  |
| 3. | Number of entries of papers sent to R&I for issue |  |
| 4. | Number of peon book entries |  |
| 5. | Number of U.O. Challans prepared |  |
| 6. | Number of envelopes prepared (if done in sections) |  |
| 7. | Entry of particulars of new files in File Register and giving number etc. to files. |  |
| 8. | Indexing of files (No. of Index slips prepared) |  |
| 9. | Recording of files (No. of files recorded and marked in register) |  |
| 10. | Weeding of files (No. of files weeded) |  |
| 11. | Preparation of weekly arrears statement. |  |
| 12. | Preparation of history sheets of cases pending disposal over a month and sending the monthly reports (No. of history sheets prepared). |  |
| 13. | Any other type of work (please specify) |  |

Signature of the Section Officer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date ­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Form B-VII

Name of the office \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the Section \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**List of Register maintained in the section**

|  |  |  |
| --- | --- | --- |
| **S.No.** | **Name of the Register** | **Information contained therein** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |

Signature of Section In-charge