



# वेस्टर्न कोलफील्ड्स लिमिटेड

**Western Coalfields Ltd.**

(भारत सरकार का मिनीरल्स श्रेणी - 1 उपक्रम)

ISO.9001: 2008 Certified

पंजीकृत कार्यालय: कोल ईस्टेट, सिविल लाइन्स, नागपुर - ४४०००१  
U10100MH1975GOI018626  
001 Website: <http://westerncoal.nic.in>

औद्योगिक संबंध विभाग

INDUSTRIAL RELATIONS DEPARTMENT

email: [gmir1.wcl@coalindia.in](mailto:gmir1.wcl@coalindia.in)

Ph: No. का/O : 0712-2510439

CIN :

Regd. Office : Coal Estate, Civil Lines, Nagpur - 440

WCLAR/MP/SELECTION/2024-25/765

Date: 18.07.2024

## INTERNAL NOTIFICATION (ONLY FOR EMPLOYEES OF WCL)

Applications through proper channel are invited from eligible departmental candidates of Western Coalfields Limited against the vacancies for selection to the following posts as per the pay scale of NCWA - XI, who fulfil the following eligibility criteria according to Cadre Scheme:-

Sl. No.	Post	Vacancy	Minimum Qualification & Eligibility	Mode
1	Staff Nurse (Trainee) in T&S Gr. C	31	10+2 plus "A" Grade Nursing Diploma or certificate from a recognized Institute approved by the Government. After completion of 01-year training they will be placed in T&S Gr. C.	Selection through Aptitude Test
2	Pharmacist (Trainee) in T&S Gr. C	13	Matriculate/Diploma in Pharmacy and registered with Pharmacy Council under Pharmacy Act 1948 with valid registration.	

**The following norms shall be adopted for empanelment of the candidates for the above posts: -**

1. Empanelment for the above posts shall be on the basis of Marks obtained in Aptitude Test as shown below: -

Aptitude Test (Objective Type)	:	90 Minutes duration (100 questions)
Maximum Marks	:	100 Marks
Minimum Pass Marks	:	50 Marks for General 40 Marks for SC/ST (10% relaxation)
2. The candidates shall be empanelled on the basis of merit based on total marks obtained in aptitude test and in case same mark is obtained by more than one candidate, their merit shall be decided on the basis of Date of Appointment, i.e., the candidate who was appointed first, shall be placed above the candidate who was appointed later. If there is a tie again, then the Date of Birth (elder being the first) will be considered for deciding the merit position.
3. Those candidates who are newly appointed as dependent/PAP and who have not completed their 6 (six) months training period as on the date of notification will not be considered for selection of the above posts.
4. Reservations norms for SC/ST and PWD candidates will be followed as per rule.

### Instructions for filling up applications

1. The candidates are advised to go through the complete notification carefully for assessing & ensuring eligibility in accordance with the qualifications and other norms before submitting the application.
2. The candidates should send their applications in prescribed proforma (enclosed), affixing recent photograph duly attested by the controlling officer/unit-in-charge, along with self-attested educational/statutory certificates as per eligibility prescribed above **through proper channel only**.
3. The respective Controlling Officer/Unit In-charge shall ensure correctness of the details mentioned in the application, counter sign with seal the documents enclosed with the application in each case (on the basis of original document) and also ensure that the **Annual Performance Ratings and Departmental Clearance Certificate** in the application proforma are duly certified before forwarding the same to to the concerned Area Personnel Manager (APM).
4. The APM must ensure that the original & complete applications of only those eligible candidates, who have secured minimum **Good rating** in performance should be physically forwarded to GM(P/IR) for consideration. In case of candidates of WCL HQ, the concerned HOD shall forward the applications to Dy. GM (P/IR) as above.
5. The data of candidates in excel format (as per enclosed proforma) shall also be provided in soft copy for the notified post separately to Dy. GM (P/IR) through email on **gmir1.wcl@coalindia.in**.
6. Applications submitted in any format other than the prescribed form may not be accepted. Applications received directly from any candidate shall not be entertained.


### Important Note

1. Only those candidates who are willing to work in any Areas/Establishments of WCL on selection may apply against this notification.
2. The selected candidates shall be posted in the Areas/Establishments of WCL as per the requirement.

### Important Dates

1. Cut-off date for determining the eligibility of the candidates as per cadre scheme will be the date of issue of the internal notification.
2. Last date of receipt of application & soft copy of proforma of verified data at IR Department, WCL HQ is **08.08.2024** and **applications received after 08.08.2024 will not be entertained**.

All concerned are requested to please arrange to give wide publicity amongst the employees and also display a copy of this Notification on Notice Boards.

  
Dy. General Manager (P/IR)

Encl: Application format & proforma for verified data

**Copy to: -**

1. All Area General Managers, WCL Areas & CWS Tadali
2. GM (Systems), WCL HQ, Nagpur
3. CMS I/C, WCL HQ, Nagpur
4. All HOD's, WCL HQ, Nagpur
5. All Notice Boards, WCL HQ, Nagpur
6. All Area Personnel Managers, WCL Areas & CWS Tadali, with a request to please ensure the following: -
  - Submission of applications and certified data in excel format from the eligible candidates within the specified date to WCL HQ.
  - Forward the applications of only those candidates whose CR rating is GOOD & above.
  - Vigilance Clearance of eligible candidates should be sent separately at the earliest.



वेस्टर्न कोलफील्ड्स लिमिटेड  
आवेदन का प्रारूप  
( बायो डाटा , सीआर एवं विभागीय अनापत्ति )

अधिसूचना क्र. एवं पद जिसके लिए आवेदन किया गया है : \_\_\_\_\_

नाम : \_\_\_\_\_

पिता का नाम : \_\_\_\_\_

एन ई आई एस क्र. : \_\_\_\_\_

वर्तमान पदनाम : \_\_\_\_\_

ग्रेड / श्रेणी / केटेगरी : \_\_\_\_\_

जन्म तारीख : \_\_\_\_\_

लिंग : \_\_\_\_\_

प्रारंभिक नियुक्ति की तारीख : \_\_\_\_\_

मोबाइल नं. \_\_\_\_\_ ईमेल : \_\_\_\_\_

यदि अनुसूचित जाति / जनजाति के हैं तो ( जाति प्रमाण पत्र संलग्न करे ) : SC / ST / NA (PLEASE TICK ANY ONE)

यदि PWD हैं तो (प्रमाण पत्र संलग्न करे ) : YES / NO (VH/HH/OH) (IF YES, PLEASE TICK ANY ONE)

वर्तमान कार्यस्थल : क्षेत्र \_\_\_\_\_ इकाई: \_\_\_\_\_ विभाग: \_\_\_\_\_

शैक्षणिक / तकनीकी योग्यता ( साक्ष्यांकित प्रतियां संलग्न करे )

क्र.	शैक्षणिक / तकनीकी योग्यता	वर्ष/ पास होने की तारीख	श्रेणी	%	बोर्ड / यूनिवर्सिटी / संस्था
1					
2					
3					
4					
5					

लंबित आरोप पत्र / जांच कार्यवाही/ दंडादेश (यदि हो तो ) कि जानकारी : \_\_\_\_\_

**घोषणापत्र**

मैं यह घोषणा करता / करती हूँ कि मेरे द्वारा दी गई उपरोक्त जानकारी/विवरण सत्य है तथा उपरोक्त जानकारी / विवरण असत्य पाए जाने पर दंडात्मक कार्यवाही का हकदार रहूँगा / रहूँगी। मैं यह भी सहमति देता / देती हूँ कि उपरोक्त पद पर चयन होने पर जिस क्षेत्र / इकाई / विभाग मे मेरी पदस्थापना की जाएगी मैं वहाँ अपना कार्यभार निर्धारित समयावधि पर ग्रहण करूँगा / करूँगी।

दिनांक : \_\_\_\_\_

स्थान: \_\_\_\_\_

(अभ्यर्थी का हस्ताक्षर)

नोट: उपरोक्त सभी फ़ील्ड अनिवार्य रूप से भरे अन्यथा आवेदन अस्वीकार किया जा सकता है।

**पिछले तीन वर्षों के दौरान कार्य निष्पादन**

वर्ष	आउटस्टैंडिंग	बहुत अच्छा	अच्छा	( )
2020-21	आउटस्टैंडिंग	बहुत अच्छा	अच्छा	( )
2021-22	आउटस्टैंडिंग	बहुत अच्छा	अच्छा	( )
2022-23	आउटस्टैंडिंग	बहुत अच्छा	अच्छा	( )

नियंत्रण अधिकारी / यूनिट प्रभारी के हस्ताक्षर  
(कार्यालयीन सील एवं दिनांक )

**विभागीय क्लियरेंस**

यह प्रमाणित किया जाता है कि श्री / श्रीमती / कु \_\_\_\_\_ के विरुद्ध कोई भी विभागीय कार्यवाही लंबित नहीं है ;

अथवा

श्री / श्रीमती/ कु \_\_\_\_\_ के विरुद्ध आरोप पत्र क्र. \_\_\_\_\_

दिनांक \_\_\_\_\_ जारी किया गया है जिसकी जांच कार्यवाही लंबित है।

नियंत्रण अधिकारी / यूनिट प्रभारी के हस्ताक्षर  
(कार्यालयीन सील एवं दिनांक )

क्षेत्रीय कार्मिक प्रमुख के हस्ताक्षर  
(कार्यालयीन सील एवं दिनांक )

STAFF NURSE

**Proforma for verified data for the post of Staff Nurse (Trainee) in T&S Gr C (For departmental candidates)**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
SL. NO.	NAME OF THE EMPLOYEE	FATHER'S NAME	NEIS NO.	GENDER M/F	PRESENT DESIGNATION	PRESENT GRADE / CAT	DATE OF APPOINTMENT	DATE OF BIRTH	WHETHER SC/ST	PWD (YES/NO)	UNIT	AREA	MOBILE NO.	EMAIL	HSC Certificate (YES/NO)	"A" Grade Diploma or Certificate recognised by the Government (YES/NO)	VC from Institute (YES/NO)	DC (YES/NO)	CR	Remark	
1																			21-22	22-23	23-24
2																					
3																					

**Instruction for filling the verified data in the proforma.**

- 1 Applicants data should be verified from the service records, only verified and authentic data should be entered in the proforma.
- 2 Proforma should be filled using font style Calibri and font size 11.
- 3 Dates should be entered in DD-MM-YYYY format.
- 4 Present designation & present grade / cat should be filled separate respective columns
- 5 Whether SC / ST column should be filled as per applicability SC for SC candidate, ST for ST Candidates for all other categories NA.

PHARMACIST

Proforma for verified data for the post of Pharmacist (Trainee) in T&S Gr C (For departmental candidates)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	
SL. NO.	NAME OF THE EMPLOYEE	FATHER'S NAME	NEIS NO.	GENDER M/F	PRESENT DESIGNATION	PRESENT GRADE / CAT	DATE OF APPOINTMENT	DATE OF BIRTH	WHETHER SC/ST	PWD (YES/NO)	UNIT	AREA	MOBILE NO.	EMAIL	SSC (YES/NO)	Degree / Diploma in Pharmacy from a Govt recognised Institute (YES/NO)	Registration with Pharmacy Council under Pharmacy Act 1948 (YES/NO)	Registration upto (date)	VE (YES/NO)	DC (YES/NO)	CR	Remark	
1																							
2																							
3																							

Instruction for filling the verified data in the proforma.

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- 4 Present designation & present grade / cat should be filled separate respective columns
- 5 Whether SC / ST column should be filled as per applicability **SC** for SC candidate, **ST** for ST Candidates for all other categories **NA**.