

GOVERNMENT OF KARNATAKA

No: WCD 261 PHP 2015

Karnataka Government Secretariat,
Multi Store Building,
Bangalore, Date: 17.10.2015

NOTIFICATION

In exercise of the powers conferred under Sub-section (1) of section 32 of the Person with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act 1995, the Government of Karnataka hereby identifies the post specified in Col. 3,4 & 5 of the Schedule below in respect of the category "B" Posts for the disabled persons in **Karnataka Government Insurance Department.**

SCHEDULE-I

Sl. No.	Name of the Department	Blindness or Low Vision	Hearing Impairment	Locomotor Disability (OA, OL, OAL, BL)
1	2	3	4	5
1	Karnataka Government Insurance Department	District Insurance Officer / Assistant Director	District Insurance Officer / Assistant Director	District Insurance Officer / Assistant Director

In exercise of the powers conferred under Sub-section (1) of section 32 of the Person with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act 1995, the Government of Karnataka hereby identifies the post specified in Col. 3,4,5,6,7,8 & 9 of the Schedule below in respect of the category "C&D" Posts for the disabled persons in **Karnataka Government Insurance Department.**


SCHEDULE-II

Sl. No	Name of the Department	Blind	Low Vision	Leprosy Cured	Hearing Impaired	Locomotor Disability	Mentally III	Mentally Retarded
1	2	3	4	5	6	7	8	9
1	Karnataka Government Insurance Department	First Division Assistant	First Division Assistant	First Division Assistant	First Division Assistant	First Division Assistant (OA, OL, OAL, BL)	-	-
2	Karnataka Government Insurance Department	Second Division Assistant	Second Division Assistant	Second Division Assistant	Second Division Assistant	Second Division Assistant (OA, OL, OAL, BL)	-	-
3	Karnataka Government Insurance Department	Stenographer	Stenographer	Stenographer	Nil	Stenographer (OA, OL, OAL, BL)	-	-
4	Karnataka Government Insurance Department	Typist	Typist	Typist	Typist	Typist (OA, OL, OAL, BL)	-	-

Sl. No.	Name of the Department	Blind	Low Vision	Leprosy Cured	Hearing Impaired	Locomotor Disability	Mentally Ill	Mentally Retarded
1	2	3	4	5	6	7	8	9
5	Karnataka Government Insurance Department	Telephone Operator	Telephone Operator	Telephone Operator	Nil	Telephone Operator (OA, OL, BL)	-	-
6	Karnataka Government Insurance Department	Attender	Attender	Attender	Attender	Attender (OA, OL, BL)	-	-
7	Karnataka Government Insurance Department	Peon	Peon	Peon	Peon	Peon (OA, OL, BL)	-	-
8	Karnataka Government Insurance Department	Book Binder	Book Binder	Nil	Book Binder	Book Binder (OA, OL, BL)	-	-

This Order is issued as per the DPAR Services Rules-1 vide Order No: DPAR 273 SeNaNi 2013
Dated: 13-03-2015

By Order and in the name of the
Governor of Karnataka


(JAYALAKSHMI) - 17/03/15

Under Secretary to Government-2,
Department of Women & Child Development &
Empowerment of Differently Abled and Senior
Citizens.

To:
The Compiler, Karnataka Gazette, Bangalore, for publication in the Extra-ordinary Gazette and to supply 500 copies to Department of Women & Child Development & Empowerment of Differently Abled and Senior Citizens, 3rd Stage, 1st Floor, M.S.Building, Bengaluru.

Copy to:

1. The Principal Secretary to Government, Finance Department, Vidhana Soudha, Bengaluru.
2. The Director, Karnataka Government Insurance Department, Bengaluru.
3. The Director, Empowerment of Differently Abled and Senior Citizens, V.V.Tower, Podium Black, Bengaluru.
4. The Secretary, Karnataka Public Service Commission, Udyoga Soudha, Bengaluru.
5. The Head of the Legal Cell, Finance & Labour Department, M.S.Building, Bengaluru.
6. The Registrar General, High Court of Karnataka, Bengaluru-560001.
7. The Under Secretary to Government, DPAR Service Rules-1, Vidhana Soudha, Bengaluru.
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