

EAST CENTRAL RAILWAY

**Office of the
General Manager(P)
Hajipur**

No.ECR/IR&W/WWO/Welfare/Part-II

Dated: 01.08.2023

**All PHODs
East Central Railway,
Hajipur**

**CAO/Con/(North and South)
MHX/Patna**

MD,CSSH, Patna

**Sub:- "On the-Spot" All India Drawing & Painting Competition for Wards
of Railwaymen-2023**

**Ref:- Secretary/ECRWWO/HJP's letter No. ECR/HRD/WWO/HJP/D&P/23
Dt. 31.07.2023**

Secretary/ECRWWO/HJP vide letter under reference (Copy enclosed) has intimated that ECRWWO/Hajipur is going to organize "On-the-Spot Drawing and Painting Competition" for Wards of Railwaymen. The selected candidates will be considered for further participation in All India Level Competition. The details of instant competition are as follows:-

Date 10.09.2023 (Sunday)


**Venue:- (a) Conference Hall, GM Office/HJP (OLD BUILDING).
(b) Conference Hall, Officers Club, MHX, PATNA.**

The Competition is open for the wards of NG staff working in HQ, Construction office and CSSH /Patna in the following 03 age groups:-

Sl.no.	Group	Age/Years	Age as on
01	Group-I	06 to 09 Years	31.08.2023
02	Group-II	09 to 12 Years	31.08.2023
03	Group-III	12 to 15 Years	31.08.2023

It is requested that entry form from the staff working under you may be forwarded & submitted alongwith **age proof documents** for above Competition to IR&W Section, Room No.-04 PCPO office/ECR/HJP by **28 August 2023**.

DA:- As Above.


(Prabhat Kumar)
Asstt. Personnel Officer/MPP
For General Manager (P)

Copy to:

- Secy./ECRWWO/HJP :-for kind information please.
- Branch Secy./ECRKHQ/HQ & Const. Branch.
- Branch Secy./AISCTREA/HQ & Const. Branch.

RAILWAY WOMEN'S WELFARE CENTRAL ORGANISATION**ENTRY FORM**

for All India Drawing & Painting Competition for wards of Railwaymen

- (i). Group - I 6 to 9 Years
 (ii). Group - II 9 to 12 Years
 (iii). Group - III 12 to 15 Years

(Age as on 31.08.2023)

Affix latest
photograph
of the child

Name of Centre _____

RAILWAY/UNIT _____

1. Name of the Child _____

2. Son/ Daughter of _____

3. (a) Designation _____ Office Address _____

Contact No. Rly _____ Mobile No. _____

4. Age of the Child _____ Group _____

5. Nature of Date of birth proof _____

It is certified that the particulars mentioned above are true and correct to the best of my knowledge and belief.

Signature of the employee

*Forwarded for necessary action*Signature of
Controlling Officer
(along with Desg.)Certified that this painting/sketch was made by the child during the On-the-Spot
Drawing and Painting Competition held on _____Signature of the President
Women's Welfare Organisation