

	<p style="text-align: center;">कार्यालय, रक्षा लेखा महानियंत्रक OFFICE OF THE CONTROLLER GENERAL OF DEFENCE ACCOUNTS उलान बटार रोड, पालम, दिल्ली छावनी - 10 ULAN BATAR ROAD, PALAM, DELHI CANTT. - 110010 Phone-011-25665500/55, 25665568 E-mail.admnx.cgda@nic.in.web.www.cgda.nic.in</p>	
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CIRCULAR

हर काम देश के नाम

No.AN/II/2407/PCDA(BR) Delhi

Dated:15.03.2021

To

✓ All PCsDA / PCA (Fys.) / PIFAs / CsDA / IFAs / CsDA (Trg.-Estt.)

Sub: Volunteers for Daporijo/ Along/ Khirmu/ Kohima/ Gangtok/ Kalingpong/ Siliguri/ Jodhpur/ Hanumangarh/ Jeori/ Uttarkashi/ Dharchula/ Akhnoor/ Srinagar/ Leh/ Rajouri station : SAO/AO

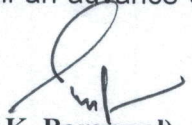
It has been decided by Competent Authority to call for volunteers amongst SAOs/ AOs for posting to different BRTF offices under PCDA (BR) Delhi Cantt who fulfill the criteria listed below

- (i) The applicant should have completed minimum 03 years at the present serving station.
- (ii) The applicant presently posted in sensitive assignment is not eligible for this posting.
- (iii) The applicant should have completed his cooling-off period after his sensitive posing.
- (iv) The service particulars of the volunteers along with APAR grading for the last three years and the other details may be forwarded in Annexure "A-1".
- (v) In case the officers have also applied for transfer to some other station in the volunteer list, an endorsement may be made against his name in the list.

2. Officers, who once apply in this Volunteer List will not be allowed to withdraw during the validity of the List unless there are pressing medical/personal reasons and recommended by the Principal Controller/ Controller under a DO letter clearly bringing out the genuineness of the case supported with relevant documents/ certificates. Further, request for cancellation will not be entertained after issue of transfer order.

3. The names of the willing officers may be forwarded by fax/ email so as to reach HQrs office by 25th March '2021 positively. Names received after the due date will not be entertained.

4. In order to avoid delay, officers working in sub offices may fax/ email an advance copy of their candidature directly to HQrs office. Nil report is also required.


 (G.K. Baranwal)
 Sr. Dy.CGDA(AN)

Copy to:

✓ HQrs office (IT & S Cell) – For uploading on website.

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 (G.K. Baranwal)
 Sr. Dy.CGDA(AN)

VOLUNTEER APPLICATION

(Original copy to be forwarded to HQrs.)

1	ACCOUNT NO					
2	GENDER (Male / Female)					
3	NAME					
4	CATEGORY (GENERAL/OBC/SC/ST/PH)					
5	GRADE					
6	DATE OF BIRTH (DD/MM/YYYY)					
7	DATE OF APPOINTMENT (in DAD) (DD/MM/YYYY)					
8	DATE OF PROMOTION (DD/MM/YYYY) (As Accounts officer & Sr. Accounts Officer)					
9	ROSTER No. (AO/SAO)					
10	HOME TOWN (Specific District as per Service Record & not Village or State)					
	If DAD office not available at Home town, nearest Station to Home town where DAD office is situated					
11	SERVICE PROFILE (In DAD)					
	Name of Office	Organisation	Whether Sensitive Assignment (Yes / No)	Station	From Date (dd/mm/yyyy)	To Date (dd/mm/yyyy)
12	CHOICE STATION (Station (NOT Office) where DAD offices are located and BHUTAN/ PORTBLAIR may not be opted as a separate panel exists for these stations)		First Preference			
			Second Preference			
			Third Preference			

13	Whether EDP trained (Yes/No) (If yes, specify project)				
14	APAR GRADING (Upto two decimal places)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;"></td> <td style="width:33%;"></td> <td style="width:33%;"></td> </tr> </table>			
15	Brief Grounds for transfer:				
<p><i>Attach latest Medical Certificate (NOT MEDICAL PRESCRIPTION & TEST REPORTS) in respect of medical cases and Service certificate showing Station & Department from the employer in case of spouse.</i></p>					
16	UNDERTAKING It is to undertake that the information furnished above are correct.				
17	Date: ___/___/20___	(SIGNATURE OF APPLICANT)			
(ALL COLUMNS ARE MANDATORY AS PER APPLICABILITY)					
(To be filled by the Controller's office)					
18	GROUND FOR RECOMMENDATION (Hard Tenure Completion, Age, Physically Challenged %, Medical Self, Medical Dependent, Serving Spouse - As per DoPT Guideline, Lady Seeking Repatriation, Home Town, Stay Away)				
19	If Not recommended reason thereof				
20	Whether any disciplinary case is pending against the individual.				
21	Date: ___/___/20___	(SIGNATURE AND SEAL OF GO(AN))			

