कार्यालय, रक्षा लेखा महानियंत्रक उलान बटार मार्ग, पालम, दिल्ली छावनी-110010

(Through website)

No.0600/AN-X/Volunteer/2018/Vol.II

Dated: 19.03.2018

To

The PCA/PCsDA/CsDA

Subject: Tran

Transfer Estt. DAD: Volunteers for Northern Region.

Reference:

HQrs. office letter No. AN/X/0600/XIX/2009/PF dated 26.10.09.

As per transfer policy of posting to centrally controlled stations of Northern Region viz. Bhadarwah, Kargil, Leh, Poonch, Rajouri & Srinagar, volunteers are called for, to facilitate repatriation of individuals serving there.

- 2. The Competent Authority has decided to invite applications of volunteers from amongst AAOs/Sr.Adr./Auditors/Clks/MTS, who have completed minimum 03 years at the present serving station, for posting to the above six centrally controlled stations of Northern Region.
- 3. In view of the above, details of volunteers in Annexure 'A-1' (copy enclosed) may please be obtained. The officials may also be informed that only those, who will be having a residual service of at least 02 years at the time of selection, will be considered for posting to the Northern Region. In case, the applicant has applied for transfer to some other station through the volunteer list/panel, an endorsement may be made against his name in the remarks column of Annexure 'B-1' (copy enclosed).
- **4.** Individuals, who once apply for the panel will not be allowed to withdraw during the validity of the panel unless there are pressing medical/personal reasons. Requests for cancellation will not be entertained after issue of transfer orders.
- 5. It is further requested to forward the original application of all the volunteers as per Annexure 'A-1' only along with connected data in Annexure 'B-1' by 02.04.2018. Annexure 'B-1' and 'C' containing individual details & service profile may also be forwarded in MS Office Excel through CGDA WAN/E-mail (admnx.cgda@nic.in).

Nil report is also required.

(कविता गर्ग)

र.ले.व.उ.म.नि. (प्रशा)

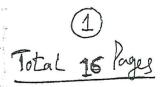
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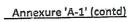


VOLUNTEER APPLICATION

(Original copy to be forwarded to HQrs.)

| 1 | ACCOUNT NO | | | | | | | |
|----|---|-------------------------|---------------------------------------|-------------|-----|-----|------------------|------------------|
| 2 | GENDER (Male / Female) | | | | | j | | |
| 3 | NAME | | | | 15 | | | |
| 4 | CATEGORY (GENERAL/OBC/SC/ST/PH) | | | 1 | 4. | | | |
| 5 | GRADE (AAO/SO(A)/SAS(App)/SUPERVISIOR(A/c)/Sr.AUDITOR/AUDITOR DEO/LIBRARIAN/MTS/DRIVER) | /CLERK/PS/STENO/HT/JHT/ | | | | | | |
| 6 | DATE OF BIRTH (DD/MM/YYYY) | | | | | | | |
| 7 | DATE OF APPOINTMENT (in DAD) (DD/MM/YYYY) | | | | | | | |
| 8 | DATE OF PROMOTION (DD/MM/YYYY) (As Group 'C' in r/o Staff & as SO(A) in r/o officers) | | | | | | | |
| 9 | ROSTER No. (Mandatory in case of AAO) | | | | | | | |
| 10 | Whether appearing in ensuing SAS Part-II (In case of Sr. Auds/Auditors/Clerks/Stenos/DEOs) | | | | | | | |
| 11 | HOME TOWN (Specific District as per Service Record & not Village or State) | | | | | 1 | | |
| | If DAD office not available at Home town, nearest Station to Home town where DAD office is situated | | | | | i. | | |
| 12 | SERVICE PROFILE (In DAD) | | | 1 | 11 | | From Date | To Date |
| | Name of Office | Organisation | Whether | Stati | OII | - 1 | FIOIII Date | 10 Date |
| | Name of Office | | Sensitive Assignment (Yes / No) | | | | (dd/mm/yyy y) | (dd/mm/yyy y) |
| | Name of Office | | Sensitive Assignment | | V. | | | |
| | Name of Office | | Sensitive Assignment | | | | | |
| | Name of Office | | Sensitive Assignment | | V | | | |
| | Name of Office | | Sensitive Assignment | | N. | | | |
| | Name of Office | | Sensitive Assignment | | N | | | |
| | Name of Office | | Sensitive Assignment | | N | | | |
| | Name of Office | | Sensitive Assignment | | N | | | |
| | Name of Office | | Sensitive Assignment | | A. | | | |
| | | | Sensitive Assignment (Yes / No) | | | | | |
| 13 | CHOICE STATION (Station (NOT Office)where DAD offices | First Preference | Sensitive Assignment (Yes / No) | | A. | | | |
| 13 | | First Preference | Sensitive Assignment (Yes / No) | | | | | |





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| | Whether EDP trained (Yes/No) (If.yes, specify project) | T | | |
|----|--|-----------------------------|---------------|---------------|
| 14 | Whether EDP trained (Yes/No) (II.yes, specify project) | | e e | |
| 15 | APAR GRADING | APAR1 | APAR2 | AP-1 |
| | (Upto two decimal places) | | | |
| 16 | Brief Grounds for tranfer: | | | |
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| | Attach latest MedicalCertificate (NOT MEDICAL PRESCRIPTION & TEST REPORT | S) in respect of | medical case: | s and Service |
| | certificate showing Station & Department from the employer in case of spouse | | · . | |
| 17 | UNDERTAKING | 8 4 | | |
| | It is to undertake that the information furnished above are correct. | 5 B | | |
| 18 | Date://20 | (SIGNATUR | E OF APPLIC | ANT) |
| | (ALL COLUMNS ARE MANDATORY AS PER APPLIC | ABILITY) | | |
| | (To be filled by the Controller's office) | | | |
| 19 | 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) | | | |
| | Seeking Repair action, nome rown, stay Away) | | | |
| 20 | If Not recommended reason thereof | | 7 | |
| | | | | |
| | | 1 | 1. | |
| 21 | Whether any disciplinary case is pending against the | - 1 161 1 | 71 | |
| | individual. | | i. | |
| | • | * | | |
| | | | | |
| 22 | Date://20 (SIGNATURI | E AND SEAL OF | FGO(AN)) | |

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(A)

Name of Volunteersn from the Organisation Annexure 'B-1'

| | SL NO | ACCOUNT NO | GENDER | NAME | CATEGORY | GRADE | DOB | DOA | HOME TOWN |
|------|-------|------------|-----------|-------|--------------|-------------------|---------------|--------------|-------------------|
| | | | (M-Male | | | | Date of Birth | Date of | (as per Srl. 9 of |
| | | | F-Female) | | Table 1 | العالم الإرسال ال | (dd/mm/yyyy) | Appointment | Annexure A) |
| | .] | | | | [5] (42 - 1) | | | (dd/mm/yyyy) | |
| ked. | | 02 | | ***** | | | W STATE | | |
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Annexure 'B-1' (contd)

| [6 | TATION where | SERVING DATE | Stay away | CHOICE1 | CHOICE2 | CHOICE3 | EDP | Whether | APAR1 | APAR2 | APAR3 |
|-----|--------------|--------------|--------------|---------|---------|---------|------------|-----------|-------|---------|-------|
| 3 | Serving | (dd/mm/yyyy) | DATE from | | | | ('Y'-Yes / | appearin | | | |
| | Serving | 144 | choice1 | | 10.0 | | · 'N'-No) | g in | | | |
| | | | (dd/mm/yyyy) | je sus | | | | ensuing | · /11 | | |
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Annexure 'B-1' (contd)

| GROUND ('Tenure'- Hard Tenure Completion, 'AGE'- Above 58 years, 'PC'- Physically Challenged (above 50%), 'MED. SELF'- Medical Self, 'MED. DEP' - Medical Dependent, 'SPOSE'- As per DoPT Guideline, | CERTIFICATE ATTACHED (Yes / No) (Whether latest Medical Certificate (NOT A MEDICAL PRESCRIPTION)/ Spouse service Certificate attached | RECOMMENDATI ON (Y-Yes, N-No) | REASON, If not recommended reason thereof- | Remarks (Detail whether volunteered for any other Panel/HYL) | i mare |
|--|---|--|--|--|--------|
| 'LADY', 'HOME TOWN', STAY AWAY') | 22 | 23 | 24 | 25 | |
| 21 | | | | | |

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Annexure 'C'

SERVICE PROFILE OF THE INDIVIDUALS

| ACCOUNT NO | GRADE | OFFICE | ORGANISATION | STATION | FROM DATE | TO DATE | DEPUTA |
|------------|-----------|--------|--------------|---------|-------------|-----------|--------|
| Accooning | 0,,,,,,,, | | | | (dd/mm/yyyy | (dd/mm/yy | TION |
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