"हर एक काम देश के नाम"



कार्यालय रक्षा लेखा महानियंत्रक

OFFICE OF THE CONTROLLER GENERAL OF DEFENCE ACCOUNT 3 and 3 across the controller general of Defence account 3 and 3 across the controller general of Defence account 3 across the controller general of Defence

उलान बटार राड, पालम, दिल्ली छोवना — 10 ULAN BATAR ROAD, PALAM, DELHI CANTT. - 10



CIRCULAR

No. AN/Estt. AAO/9010/Port Blair/2020-21

Dated: 04.02.2021

To,



All PCsDA/PCA(Fys)/CsDA

Sub: Volunteers for Port Blair (2020-21): AAOs.

The Competent Authority has decided to invite application of volunteers from AAOs for Port Blair station on the following criteria:

- (i) Officers should have completed minimum 02 years of service in the present serving station and for AAOs on provisioning, they should have completed 03 years stay at their present place of posting.
- (ii) Officers, who will have a residual service of at least 02 years at the time of selection will be considered for posting to Port Blair and will be repatriated to one of their three different choice stations on completion of prescribed tenure.
- (iii) The full service particulars of the volunteers along with APAR gradings for the last three years and the other details may be forwarded in Annexure "A-1" as prescribed vide HQrs circular dated 08.08.2014.
- (iv) In case the officers has 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 volunteer for Port Blair station, will not be allowed to withdraw during the validity of volunteer list unless there are compelling medical / personal reasons and recommended by the of Principal Controller / Controller under a DO letter clearly bringing out the genuineness of the case supported with relevant documents/certificates. Further, requests for cancellation will not be entertained after issue of transfer order.
- 3. It is requested to forward original application of all the volunteers strictly as per Annexure 'A-1' along with connected data in Annexure 'B-l' as prescribed vide HQrs circular dated 08.08.2014 by **20**th **February 2021**. Annexure 'B-1' may also be forwarded in **MS Office Excel format** to CGDA AN (Estt. AAO) Email ID (admnix.cgda@nic.in).
- The application received after due date will not be considered.

NIL report is also required. Copy by post may not be awaited.

> (Sunil Srivastava) AO (Admin)

Copy to:

1) AN-Pay Section (Local) - For information w.r.t. above and necessary action please.

2) IT & S Wing (Local) - With a request to upload on CGDA Website.

(Sunil Srivastava) AO (Admin)

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 (AAO/SO(A)/SAS(App)/SUPERVISIOR(A/c)/Sr.AUDITOR/AUDITOR/UDEO/LIBRARIAN/MTS/DRIVER)	CLERK/PS/STENO/HT/JHT/				
6	DATE OF BIRTH (DD/MM/YYYY)					
7	DATE OF APPOINTMENT (in DAD) (DD/MM/YY	YYY)				
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 & no					
	If DAD office not available at Home town, n where DAD office is situated					
12	SERVICE PROFILE (In DAD)					
4 C 5 G 6 E 7 E 6 () 9 F 6 () 10 F 6 () 11 E 6 () 12 E 6 () 1	Name of Office	Organisation	Whether Sensitive Assignment (Yes / No)	Station	From Date (dd/mm/yyy y)	To Date (dd/mm/yyy y)
13	CHOICE STATION		PORT BLAIR			
	Vol. 1: - (NOT Office) where DAD offices					
	(Station (NOT Office)where DAD offices are located and BHUTAN/ PORTBLAIR may not be opted as a separate panel	Second Prefer				

Annexure 'A-1' (contd)

14	Whether EDP trained (Yes/No) (If yes, specify project)	
15	APAR GRADING	
	(Upto two decimal places)	
16	Brief Grounds for tranfer:	
	Attach latest MedicalCertificate (NOT MEDICAL PRESCRIPTION & TEST REPORT Certificate showing Station & Department from the employer in case of spous	RTS) in respect of medical cases and Service se.
17	UNDERTAKING	
	It is to undertake that the information furnished above are correct.	
18	Date: / /20	(SIGNATURE OF APPLICANT)
	(ALL COLUMNS ARE MANDATORY AS PER APPLI	CABILITY)
19	(To be filled by the Controller's office) 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)	
20	If Not recommended reason thereof	
21	Whether any disciplinary case is pending against the	
	individual.	

SI. No.	Account No.	Gender M-Male, F- Female	NAME	CATE	GRADE	DOB Date of Birth (dd/mm/yyyy)	Date of	HOME TOWN (as per SI. 9 of Annexure A)		Choice I	Choice 2	Choice 3	EDP ('Y'-yes/' N' No)	Whether appearing in ensuing SAS Part II	APAR 1	APAR 2	(Tenure' Hard Tenure Completion,	ATTATCHED (Yes/No) (Whether	ATION (y-Yes,	reason thereof	(Detail f whether volunteer
							30/mm/yyyy)		1								58 years, 'PC' Physically Challenged (above 50%), 'MED.Self- Medical self,	latest Medical Certificate(NO T A MEDICAL PRESCRIPTION)/Spouse serving Certificate attatched	-		for any o
														8	(Upto two dec	rimal number)					