

OFFICE OF THE CONTROLLER OF DEFENCE ACCOUNTS No.1, STAFF ROAD, SECUNDERABAD-500009

TELE: 040-27843385

FAX:040-27817275

NO.AN/I/1005/VOLUNTEERS

Dated: 25-08-2015

To

All Sections of Main Office All Sub Offices under CDA Secunderabad

Sub: Transfer Estt-DAD: Volunteer for Northern Region.

HQrs have called for volunteers amongst AAOs/Sr.Auds/Auditors/Clerks/MTS who have completed minimum 03 years at the present serving station, for posting to the six centrally controlled stations of Northern Region viz., Bhadarwah, Kargil, Leh, Poonch, Rajouri & Srinagar.

The full service particulars of the volunteers and other details may be forwarded as per the enclosed Annexure 'A-1'. The individuals may be informed that only those who will be having 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 also applied for transfer to some other station in the volunteer list/panel, an endorsement may be made against his/her name in the list.

Hqrs. Office has further directed to intimate that the 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 order.

The report should reach this office positively by <u>05-09-2015</u>.

NIL report is also required.

SR.ACCOUNTS OFFICER (AN)

Copy to:

The EDP Centre, Local

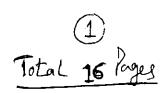
For uploading the same in the website.

SR.ACCOUNTS OFFICER (AN)

VOLUNTEER APPLICATION

(Original copy to be forwarded to HQrs.)

1	ACCOUNT NO					
2	GENDER (Male / Female)			<u> </u>		
3	NAME		- ,			
4	CATEGORY (GENERAL/OBC/SC/ST/PH)					
5	GRADE (AAO/SO(A)/SAS(ADD)/SUPERVISIOR(A/C)/Sr.AUDITOR/AUDITOR/CLERK/PS/STENO/HT/JHT/ DEO/LIBRARIAN/MTS/DRIVER:					
6	DATE OF BIRTH (DD/MM/YYYY)					
7	DATE OF APPOINTMENT (in DAD) (DD/MM/YYYY)			1		
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)			_		
	If DAD office not available at Home town, where DAD office is situated					
12	SERVICE PROFILE (In DAD)					
	Name of Office	Organisation	Whether	Station	From Date	To Date
			Sensitive Assignment (Yes / No)		(dd/mm/yyy y)	(dd/mm/yyy y)
i			Assignment		1.	
			Assignment		1.	
			Assignment		1.	
			Assignment		1.	
			Assignment		1.	
			Assignment		1.	
			Assignment		1.	
			Assignment		1.	
			Assignment		1.	
13	CHOICE STATION	First Preference	Assignment (Yes / No)		1.	
13	(Station (NOT Office)where DAD offices	Second Prefere	Assignment (Yes / No)		1.	
13	(Station (NOT Office)where DAD offices	Second Prefere	Assignment (Yes / No)		1.	



Annexure 'A-1' (contd)

14	Whether EDP trained (Yes/No) (If yes, specify project)		· · · · · · · · · · · · · · · · · · ·					
15	APAR GRADING							
	(Upto two decimal places)	1	·					
16	Brief Grounds for tranfer:							
	Attach latest MedicalCertificate (NOT MEDICAL PRESCRIPTION & TEST REPORTS	51 in annual of an		45				
	certificate showing Station & Department from the employer in case of spouse.		eaicai cases an	a Service				
17	UNDERTAKING							
	It is to undertake that the information furnished above are correct.							
18	Date://20	(SIGNATURE (OF APPLICAN	Τ)				
(ALL COLUMNS ARE MANDATORY AS PER APPLICABILITY)								
	(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)							
20	If Not recommended reason thereof		<u> </u>					
21	Whether any disciplinary case is pending against the individual.			_				
22	Date://20 (SIGNATURE	AND SEAL OF C	:O/ANI)					
	Date://20 (SIGNATURE AND SEAL OF GO(AN))							

(2)