

### OFFICE OF THE CONTROLLER OF DEFENCE ACCOUNTS NO.1 STAFF ROAD, SECUNDERABAD-500 009 TELEPHONE NO.040-27843385, FAX NO.040-27817275



No.AN/I/1005/Yly Volunteers /2021

Dated: 06.07.2021

### CIRCULAR (Through Website)

То

- 1. The Group Officers (local).
- 2. The DCDA I/c, PAO(ORs)EME, Sec'bad.
- 3. The ACDA I/c, AAO(Army) Visakhapatnam.
- 4. The ACDA I/c, PAO(ORs)AOC, Sec'bad.
- 5. All Sections in Main Office.

6. All sub-offices located at: Secunderabad/Hyderabad/Eddumailaram/Suryalanka/Bapatla/Tirupathi.

#### Subject :- Yearly volunteers for transfer to choice stations / Inter Commands - 2021-22.

1. The details of volunteers [Group'A' & 'B' officers & Group 'B' & 'C' staff] for the Year ending 31.08.2021 for transfer to their choice stations / inter command transfers, serving in your office may please be forwarded to this office in duplicate in the prescribed format enclosed along with necessary declarations so as to reach this office on or before 16.08.2021.

2. The volunteers up to the grade of AAOs may please be advised to apply in the prescribed format **Annexure-A** and SAOs/AOs in **Annexure-B** which are enclosed herewith.

3. While forwarding the applications, the following guidelines may be kept in view:-

- a) Applications in respect of officers/staff who have not completed two years in the station are not to be entertained / forwarded.
- b) New recruits/individuals joined through SSC/IDT, who have not completed 3 years (male) and 2 years (female) in the station are not to be entertained.
- c) Newly promoted AAO will have to serve for 3 years at their allotted place of posting.
- d) The list in respect of staff & officers should be sent separately.

4. Specific recommendation of the I/c of the Sub-offices may invariably be indicated while sponsoring the names to Main Office.

5. Applications received after **16/08/2021** may not be forwarded.

(S. VATSALA)

Asst. Controller (AN)

Encls: As above.

Copy to: The IT Section

The IT Section, Local:- For uploading in the website please.

Sd/-(M.V. SUBRAHMANYAM) Sr.Accounts Officer (AN)

### **VOLUNTEER APPLICATION**

## (To be submitted to Main Office in Duplicate)

1	Account 1	No.				
2	Gender (N	/ale/Female)				
3	Name					
4	Category	(General/OBC/SC/ST,	/PH)			
5	Grade					
6	Date of B	<b>irth</b> (dd/mm/yyyy)				
7	Date of A (dd/mm/yyy	<b>ppointment</b> (in	DAD)			
8	Date of promotion (dd/mm/yyyy) (As Group "C" in r/o Staff & SO (A) in r/o Officers)					
9	Roster No	<b>D</b> in case of AAO)				
10	Whether a Part-II	ppearing in ensu				
11	Home Town (Specific District as per Service Record not Village or State)					
12				Profile (In DAD		
	me of the Office	Organisation	Whether on Sensitive Assignment (Yes/No)	Station	From Date (dd/mm/yyyy)	To Date (dd/mm/yyyy)

			:: 2 ::						
	<b>Choice Station :</b>	First Pro	eference						
	Station (Not office) where DAD								
13	Offices are located and	Second Preference							
	BHUTAN/PORT BLAIR may not								
•	be opted as a separate panel	Third Preference							
	exists for these stations								
14	Whether EDP trained (if Yes specify	Thether EDP trained (if Yes specify project)							
		2017-18	2018-19	2019-20					
15	APAR Grading								
	Brief Grounds for Transfer:								
16									
10									
		AIOT	MEDICAL	DDECCDIDTI	ON & TEET				
	Attach latest Medical Certificat	tach latest Medical Certificate (NOT MEDICAL PRESCRIPTION & TEST							
	<b>REPORTS)</b> in respect of medical cases and Service certificate showing station & department								
	from the employer in case of spouse.								
	UNDERTAKING	n furnich	ad above are e	orrect					
	I hereby certify that the informatio	ii iumisi	leu above ale c	onect.					
10									
17									
	Date: / /2021		(SIGNATU	RE OF APPLI	(CANT)				
	Date: /2021  (SIGNATURE OF APPLICANT)				- •				
	(ALL COLUMNS ARE MANDATORY AS PER APPLICABILITY)								
	<u>( To be filled</u>	<u>l by the</u>	Controller's	<u>office )</u>					
	GROUND FOR RECOMMENDA	TION							
	GROUND FOR RECOMMENDA								
	(Hard Tenure completion, Age, Physic	ally							
18	Challenged %, Medical Self, Medical								
	Dependent, Serving Spouse – As per DoPT								
	Guideline, Lady seeking repatriation,								
	Town, Stay Away)								
19	<b>REASON</b> (If not recommended)								
20	Whether any disciplinary of	case is							
20	pending against the individual:								

21

Date:\_\_\_\_/2021

SIGNATURE AND SEAL OF GO (AN)

# Proforma for Volunteer List – SAOs/AOs

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Name			
Date of Birth (dd/mm/yyyy)			
Grade			
Account No.			
Date of Appointment			
Office where serving			
Organisation			
Date of Promotion to AO's grade			
Whether EDP trained (Yes/No)			
Home Town			
If DAD office not available at Home Town, nearest station to Home Town where DAD office exists			
APAR Gradings of last three years	2017-18	2018-19	2019-20
Station seniority			
First Choice station			
Second Choice station			
Third Choice station			
State/Own			

Station served	From Date	To Date
Physically Handicapped (Yes/No)		
Disciplinary case pending (Yes/No)		
Spouse Working (Yes/No)		
Grounds for Transfer		

Date :

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(SIGNATURE)