



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/ Volunteers/NR/2022

Dated: 25 .08.2021

CIRCULAR
(Through Website)

To

1. The DCDA I/c, PAO(ORs)EME, Sec'bad.
2. The Group Officers (local).
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.

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

HQrs Office has called for volunteers amongst **Sr.Adrs/Auditors/Clks/MTSS** 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 vide Lr.No. 0600/AN/Estt-Other/Tenure/2022/Vol.I/volunteers Dated 24.08.2021.

The Applications from the volunteers 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 posting will be considered for posting to the Northern Region.

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 orders.

The Applications of the volunteers should reach this office positively by **20-09-2021** for onward transmission to HQrs office.

NIL report is also required.

(S VATSALA)

Asst. Controller (AN)

Copy to:

The IT Section, Local -

For uploading the same in the website.

Sd/-

(M.V. SUBRAHMANYAM)
Sr. Accounts Officer (AN)

VOLUNTEER APPLICATION
(Original copy to be forwarded to HQrs.)

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|-------------------|--|---|--------------|---|---------|------------------------|----------------------|
| 1 | ACCOUNT NO | | | | | | |
| 2 | GENDER (Male / Female) | | | | | | |
| 3 | NAME | | | | | | |
| 4 | CATEGORY (GENERAL/OBC/SC/ST/PH) | | | | | | |
| 5 | GRADE (AAO/SO(A)/SAS(Add)/SUPERVISOR(A/C)/Sr. AUDITOR/AUDITOR/CLERK/PS/STENO/JHT/JHT/ DEO/LIBRARIAN/MTS/DRIVER) | | | | | | |
| 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) | | | | | | |
| | If DAD office not available at Home town, nearest Station to Home town where DAD office is situated | | | | | | |
| 12 | SERVICE PROFILE (In DAD) | | | | | | |
| | Name of Office | | Organisation | Whether Sensitive Assignment (Yes / No) | Station | From Date (dd/mm/yyyy) | To Date (dd/mm/yyyy) |
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| | 13 | 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 | | | | | | | |

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Total 16 Pages

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| 4 | Whether EDP trained (Yes/No) (If yes, specify project) | | |
| 5 | APAR GRADING Upto two decimal places) | | |
| 16 | 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> | | | |
| 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 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 | _____ | |
| 21 | Whether any disciplinary case is pending against the individual. | _____ | |
| 22 | Date: ___/___/20___ | (SIGNATURE AND SEAL OF GO(AN)) | |

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