

THROUGH WEBSITE



OFFICE OF THE CONTROLLER OF DEFENCE ACCOUNTS
NO.1 STAFF ROAD, SECUNDERABAD-500 009
TELEPHONE NO.040-27843385, FAX NO.040-27810499



CIRCULAR

No. AN/1/1004/AAOs/Port Blair/2019-20

Date: 28.08.2019

To

1. The CDA, IT&SDC, Secunderabad
2. The ACDA I/c, PAO (ORs) EME, Secunderabad
3. The ACDA I/c, PAO (ORs) AOC, Secunderabad
4. The Officer I/c, AAO (Army), Visakhapatnam
5. All the other sub-offices in Secunderabad/Hyderabad/Eddumailaram & Suryalanka
6. All sections in Main Office.

Sub: Volunteers to Port Blair (2019-20): AAOs.

** ** *

Hqrs. Office has called for volunteers from amongst AAOs for posting to Port Blair vide Hqrs letter No. AN/IX/9010/Port Blair/2019-20, dt 26.08.2019 (copy enclosed). In this connection, it is stated that names of the AAOs below 56 years, who are willing for posting to Port Blair may be called for and forwarded to this office in the prescribed proforma (Annexure 'A-1' enclosed) latest by **06.09.2019** for onward transmission to Hqrs. Office.

It may also be informed that only those who will have residual service of at least 02 years at the time of selection will be considered for posting and will be repatriated to one of their choice stations on completion of the prescribed tenure. In case the individual has applied for transfer to some other station in the volunteer list, an endorsement may be made against his name in the list.

Volunteers, who once apply for the panel, will not be allowed to withdraw during the validity of volunteer list unless there are compelling medical/personal reasons and will be considered with the due recommendation 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.

'Nil' report is also required. This may be accorded '**TOP PRIORITY**'. In this connection, it is informed that despite requests, 'Nil' reports are not being furnished to the main office which has been viewed seriously. It is once again requested to furnish the same without fail.

CDA has *seen*.

Encls : as above

Copy to
Office I/c, ~~EDP~~ Centre-

for uploading the same to website.

-Sd/-
(S Vatsala)
ACDA (AN)

(L Padmapani)
SAO (AN)

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 (A-0/SO(A)/SA(S)/APP)/SUPERVIS (R/A/C)/Sr. AUDITOR/AUDITOR/CLERK/STENOGR-1/JHT/ DEP. 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)
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				

14	Whether EDP trained (Yes/No) (If yes, specify project)			
15	APAR GRADING (Upto two decimal places)			
16	Brief Grounds for transfer:			
<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>				
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)				
<u>(To be filled by the Controller's office)</u>				
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))		