

कार्यालय रक्षा लेखा नियंत्रक, रिज रोड, जबलपुर
OFFICE OF THE CONTROLLER OF DEFENCE ACCOUNTS, RIDGE ROAD, JABALPUR

Website

No. AN/I/1133/Deputation/Vol. XI

Dated: 10.03.2021

To,

All Sub Offices under CDA Jabalpur.

All sections in Main Office CDA Jabalpur.

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

Reference:- HQrs office circular no. 0600/AN/Estt-Other/Tenure/2021/Vol.II/
Volunteers, dated: 08.03.2021.

As per transfer policy of posting to centrally controlled stations of Northern Region viz. Bhadarwah, Kargil, Leh, Poonch, Rajouri & Srinagar, volunteers are called for by the HQrs. Office to facilitate repatriation of the individuals serving there.

2. The Competent Authority at the HQrs. Office has decided to invite applications of volunteers from amongst Sr. ADR./Auditors/Clks/MTS, who have completed minimum 03 years at the present serving station, for posting to the above six centrally controlled stations of Northern Region.

3. In view of the above, details of volunteers in Annexure 'A-1' (copy enclosed) may please be obtained. The officials may also be informed that only those, who will be having a residual service of at least 02 years at the time of posting will be considered for posting to the Northern Region. In case, the applicant has applied for transfer to some other station through volunteer list/panel, an endorsement may be made regarding that.

4. Individuals, who once apply in this Volunteer List will not be allowed to withdraw during the validity of the list unless there are pressing medical/personal reasons. Requests for cancellation will not be entertained after issue of transfer orders.

5. It is, therefore, requested to obtain & forward the application (in original) of all the volunteers in Annexure-'A-1' by **16.03.2021** for onward transmission to HQrs. Office. While forwarding the names kindly enclose a 'No Disciplinary/Vigilance/Criminal case is pending certificate' w.r.t. the official.


Sr. Accounts Officer (AN)

Copy to:-

The Officer I/c, For uploading to CDA Jabalpur website.
OA Cell

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Sr. Accounts Officer (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 (AAO/SO(A)/SAS(Addl)/SUPERVISOR(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)					
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			

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Total 16 Pages

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14	Whether EDP trained (Yes/No) (If yes, specify project)			
15	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	<p>UNDERTAKING It is to undertake that the information furnished above are correct.</p>			
18	Date: ___/___/20___	(SIGNATURE OF APPLICANT)		
(ALL COLUMNS ARE MANDATORY AS PER APPLICABILITY)				
<p><u>(To be filled by the Controller's office)</u></p>				
19	<p>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)</p>			
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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