## रक्षा लेखा महानियंत्रक Controller General of Defence Accounts उलान बटार रोड,पालम, दिल्ली छावनी – 110010 Ulan Batar Road, Palam, Delhi Cantt – 110010

**CIRCULAR** 

No. AN/IX/9010/Port Blair/2019-20

Dated: 26.08.2019

To,

All PCsDA/PCA(Fys)/CsDA

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

Please ascertain and furnish the names of volunteers (AAOs) below 56 years for posting to Port Blair. The complete service particulars of the volunteers along with ACR gradings for the last three years and other details may be forwarded as per the enclosed Annexure 'A-1'. The individuals may 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 to Port Blair 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.

- 2. Individual, who once volunteers for Port Blair Volunteer, will not be allowed to withdraw his candidature 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.
- 3. It is requested to forward original application of all the volunteers strictly as per Annexure 'A-1' along with connected data in Annexure 'B/C' by 15<sup>th</sup> September' 2019. Annexure 'B' may also be forwarded in MS Office Excel format to CGDA Admin-IX Email ID (admnix.cgda@nic.in).

NIL report is also required.

(Mukesh Sharma)

Sr. AO (AN)

Copy to:

1) AN-IV Section (Local) — For information w.r.t. above and necessary action please.

2) IT & S Wing (Local) - With a request to upload on CGDA Website.

—∞ ≤ol × − (Mukesh Sharma)

Sr. AO (AN)

## **VOLUNTEER APPLICATION**

(Original copy to be forwarded to HQrs.)

1	ACCOUNT NO	(8)				
2	GENDER (Male / Female)					
3	NAME					
4	CATEGORY (GENERAL/OBC/SC/ST/PH)		, , ,			
5	GRADE (AAO/SO(A)/SAS(App)/SUPERVISIOR(A/c)/Sr.AUDITOR/AUDITO DEO/LIBRARIAN/MTS/DRIVER)	DR/CLERK/PS/STENO/HT/JHT	7			
6	DATE OF BIRTH (DD/MM/YYYY)			85.070		1.0
7	DATE OF APPOINTMENT (in DAD) (DD/MM/					
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)	6 3				
11	HOME TOWN (Specific District as per Service Record & n	ot Village or Sta	ite)			
	If DAD office not available at Home town, where DAD office is situated	nearest Station	to Home town			
12	SERVICE PROFILE (In DAD)					
	Name of Office	Organisation	Whether Sensitive Assignment (Yes / No)	Station	From Date (dd/mm/yyy y)	To Date (dd/mm/yyy y)
	Name of Office	Organisation	Sensitive Assignment	Station	(dd/mm/yyy	(dd/mm/yyy
	Name of Office	Organisation	Sensitive Assignment	Station	(dd/mm/yyy	(dd/mm/yyy
	Name of Office	Organisation	Sensitive Assignment	Station	(dd/mm/yyy	(dd/mm/yyy
	Name of Office	Organisation	Sensitive Assignment	Station	(dd/mm/yyy	(dd/mm/yyy
	Name of Office	Organisation	Sensitive Assignment	Station	(dd/mm/yyy	(dd/mm/yyy
	Name of Office	Organisation	Sensitive Assignment	Station	(dd/mm/yyy	(dd/mm/yyy
	Name of Office	Organisation	Sensitive Assignment	Station	(dd/mm/yyy	(dd/mm/yyy
			Sensitive Assignment (Yes / No)	Station	(dd/mm/yyy	(dd/mm/yyy
13	CHOICE STATION  (Station (NOT Office) where DAD offices	First Preference	Sensitive Assignment (Yes / No)	Station	(dd/mm/yyy	(dd/mm/yyy
13	CHOICE STATION (Station (NOT Office)where DAD offices are located and BHUTAN/ PORTBLAIR	First Preference	Sensitive Assignment (Yes / No)	Station	(dd/mm/yyy	(dd/mm/yyy
13	CHOICE STATION  (Station (NOT Office) where DAD offices	First Preference	Sensitive Assignment (Yes / No)	Station	(dd/mm/yyy	(dd/mm/yyy

## Annexure 'A-1' (contd)

14	Whether EDP trained (Yes/No) (If yes, specify project)			
15	APAR GRADING			
	(Upto two decimal places)			
16	Brief Grounds for tranfer:			
	Attach latest MedicalCertificate (NOT MEDICAL PRESCRIPTION & TEST REPORT certificate showing Station & Department from the employer in case of spouse		edical cases an	d Service
17	UNDERTAKING			
	It is to undertake that the information furnished above are correct.			
18	Date: / /20	(SIGNATURE	OF APPLICAN	Γ)
18	Date: / /20  (ALL COLUMNS ARE MANDATORY AS PER APPLICATION)	20	OF APPLICAN	т)
19	4 9	20	OF APPLICAN	Τ)
	(To be filled by the Controller's office)  GROUND FOR RECOMMENDATION  (Hard Tenure Completion, Age, Physically Challenged %, Medical Self, Medical Dependent, Serving Spouse - As per DoPT Guideline, Lady	20	OF APPLICAN	τ)
19	(To be filled by the Controller's office) 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	OF APPLICAN	Τ)

oluntee Account No.	rs for POR Gender M-Male, F- Female	T BLAIR (	CATE GORY	GRADE	Date of Birth (dd/mm/yyyy)	Date of	HOME TOWN (as per \$1.9 of Annexure A)		Choice I	Choice 2	Choice 3	EDP (Y'-yesf' N' No)	Whether appearing in ensuing SAS Part II	APAR I	APAR 2	АРАНЗ	Completion, 'AGE'-Above 58 years, 'PC' Physically Challenged	(Yes/No) (Whether latest Medical Certificate(NO	ATION (v-Yes, N-No)	(Detail whether volunteer for any of panel/HY
												1		(Upto two d	ecimal number	)				_

€ 8

025 **\*** 

## SERVICE PROFILE OF THE OFFICERS

ACCOUNTS NO.	GRADE	OFFICE	ORGANIZATION	STATION	FROM DATE (dd/mm/yyyy)	TO DATE (dd/mm/yyyy)	DEPUTATION