

रक्षा लेखा प्रधान नियंत्रक (अनु.एवं वि.) कार्यालय, कंचनबाग, हैदराबाद

Office of PCDA(R&D), Kanchanbagh, Hyderabad - 500 058

ई-मैल / e-mail :: cdard-hyd.cgda@nic.in

जैन/ Phone : (040) 24347621 / 22 फैक्स / Fax :: (040) 24347623



फाडल सं. ::

AN/R&D/1006/Vol. XXXV

हर काम देश के नाम

दिनांक.

11.11.2020

परिपत्र / Circular

विषय::

Volunteer for Ranikhet and Lansdowne Station: Sr.

Auditor/Auditor/Clerks

संदर्भ::

मुख्यालय का पत्र सं. AN/Estt-Others/10047/3/20 दि. 09.11.2020

-000-

Hqrs. office, vide their letter under reference, has called for volunteers amongst Sr. Auditor/Auditor/Clerks for Ranikhet and Lansdowne.

2. Interested officials amongst Sr. Adrs/Auditors/Clk may submit their applications in Anneuxre 'A-1' to Administration Section on or before 19.11.2020.

Alasti

(ए. एस. श्रीलता श्रीनिवास/A. S. Srilatha Sreenivas)

्र्रे^{८९} वस्ष्ठ लेखा अधिकारी (प्रशा.) / S. A. O.(AN)

मुख्य कार्यालय में सभी अनुभागों को परिचालित / Circulated to all sections in Main Office

परिचालित केलिए / Circulated to ::

a) ले.का.(अनु.एवं वि.) एन.एस.टी.एल., विशाखपट्नम / AO(R&D)NSTL, Visakhapatnam

b) ले.का.(अनु.एवं वि.)एस.बी.सी., विशाखपट्नम / AO(R&D)SBC, Visakhapatnam

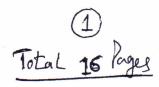
C) ले.का.(अनु.एवं वि.)डी.एम.डी.ई., सिकंदराबाद / AO(R&D)DMDE, Secunderabad

d) ले.का.(अनु.एवं वि.)एस.एफ.सी., जगदलपुर / AO(R&D)SFC, Jagdalpur निल रिपोर्ट भी मांगी जाती है / Nil report is also requested

VOLUNTEER APPLICATION

(Original copy to be forwarded to HQrs.)

All of the second second						
1	ACCOUNT NO					
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/AUDITOR/CLERK/PS/STENO/HT/JHT/ DEO/LIBRARIAN/MTS/DRIVER)				V	
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 & n					
	If DAD office not available at Home town, nearest Station to Home town where DAD office is situated					
12						
	Name of Office	Organisation	Whether Sensitive Assignment (Yes / No)	Station		To Date (dd/mm/yyy y)
13	(Station (NOT Office)where DAD offices are located and BHUTAN/ PORTBLAIR	First Preference				
		Second Preference				
	exists for these stations)	Third Preference				



Annexure 'A-1' (contd)

14	Whether EDP trained (Yes/No) (If yes, specify project)	T							
15	APAR GRADING	APAR1	SFAR2	APACI					
	(Upto two decimal places)								
16	Brief Grounds for tranfer:								
	Attach latest MedicalCertificate (NOT MEDICAL PRESCRIPTION & TEST REPORT	S) in respect of	medical cases	and Service					
	certificate showing Station & Department from the employer in case of spouse								
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)									
19	(To be filled by the Controller's office) GROUND FOR RECOMMENDATION								
19	(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.	i							

22	Date://20 (SIGNATURE	/(SIGNATURE AND SEAL OF GO(AN))							

