

रक्षा लेखा नियंत्रक, उदयन विहार, नारंगी, गुवाहाटी-781171 Controller of Defence Accounts, Udayan Vihar, Narangi, Guwahati-781171 Fax: 0361-26 40204, Phone: 0361-2640394, 2641142



e-mail: Cdaguwadmin1a.dad@hub.nic.in

No. AN/1A/IC/AAO/Vol-XXIII

Date:

13 / 07/2020

IMPORTANT CIRCULAR NO- 79

To,

- 1. All sections in Main Office CDA Guwahati (Through Website)
- 2. All sub Offices under CDA Guwahati (Through Website)

Subject:

Annual report for Inter Command transfer in respect of AAOs for the year 2020-21

Annual report for inter command transfer in respect of AAOs for the year 2020-21 is to be furnished to the HQrs Office, Delhi Cantt.

Accordingly, willing officers may prefer their applications for inter command transfer (in duplicate) to their choice stations as per proforma attached, so as to reach this office latest by 14.08.2020. Applications received after the scheduled date will under no circumstances be entertained.

Regarding the request of newly promoted AAOs for inter command transfer, it is stated that the newly promoted AAOs are required to serve at the initial stations of posting for 03 years as on 31.08.2020 before seeking a choice station of posting.

Enclosure:

As above .

Sd-

(Debapriya Das)
Accounts Officer (AN)

N.O.O.

The Officer in Charge

EDP cell (Local)

For uploading in the website

Accounts Offic



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Accounts Officer (AN)

VOLUNTEER APPLICATION

(Original copy to be forwarded to HQrs.)

1	ACCOUNT NO		*	1:	McMarket Co. Commerce Co.	MORNEW CHINASE RESIDENCE AND CONTRACT OF THE PARTY OF THE	
2	GENDER (Male /-Fernale)				*		
3	NAME			1.			
4	GRADE						
5	DATE OF BIRTH						
6	DATE OF APPOINTMENT (DAD)						
7	DATE OF PROMOTION (As Clerk in r/o Staff & as SO(A) in r/o officers)						
8	ROSTER No. & CATEGORY (Mandatory in case of AAO)			:			
9	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						
10	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)	
11	CHOICE STATION (Station (NOT Office) where DAD offices are	First Preference					
	located)	Second Preference Third Preference					
		<u> </u>				PTO	



VOLUNTEER APPLICATION

(Original copy to be forwarded to HQrs.)

	Whether EDP trained (Yes/No) (If yes, specify project)	I-						
13	APAR GRADING (Upto two decimal places)	APAR1	APAR2	APAR3				
	Brief Grounds for tranfer:							
	Attach latest MedicalCertificate (NOT MEDICAL PRESCRIPTION & TEST REcertificate showing Station & Department from the employer in care of a	EPORTS) in respect of	medical cases	and Service				
	Attach latest MedicalCertificate (NOT MEDICAL PRESCRIPTION & TEST RE certificate showing Station & Department from the employer in case of sy If Spouse serving in DAD, Specify Office & Station of present posting. Station for which Spouse has applied as volunteer/Station Senior	EPORTS) in respect of pouse.	medical cases	and Service				

It is to undertake that the information furnished above are correct.

Date:

(SIGNATURE OF # PLICANT)

(ALL COLUMNS ARE MANDATORY AS PER APPLICABILITY)

110 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)	7
If Not recommended reason thereof	
Whether any disciplinary case is pending against the individual.	
	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) If Not recommended reason thereof

Date:

(SIGNATURE AND SEAL OF GO(AN))