

रक्षा लेखा नियंत्रक का कार्यालय, गुवाहाटी
उदयन विहार, नारंगी, गुवाहाटी- 781171
OFFICE OF THE CONTROLLER OF DEFENCE ACCOUNTS, GUWAHATI
UDAYAN VIHAR, NARANGI, GUWAHATI-781171

IMPORTANT CIRCULAR NO:-58

No. AN/1A/IC/Adr/Vol-XXVIII

Dated : 14/09/2015

To

1. All Section in MO CDA Guwahati
2. All Sub-Offices

Subject: Half yearly report for Inter -Command Transfer in r/o of Gp. B & Gp. C Staff upto AAO Level for 10-2015.

Half Yearly report for Inter-Command transfer in respect of staff is to be furnished during 10/2015 to HQrs. Office Delhi Cantt.

Accordingly, willing Officers/ staffs may prefer their applications for Inter -Command transfer to their choice stations as per "Proforma" attached, so as to reach this office latest by 24/09/2015.


As regards the request of new recruits for Inter-Command transfer, it is stated that the newly recruited staffs are required to serve at the initial stations of posting for 3(Three) years as on 31.10.2015 before seeking a choice station of posting. In the case of newly recruited lady employees, the period is, however, 2 (two) years.

Encl: As Above

-sd-
(H B Dutta)
Sr. Accounts Officer (AN)

✓ Copy to: The Officer-in charge
EDP Section

It is requested to upload the same in the official website of
CDA Guwahati.


(H B Dutta)
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/FH)					
5	GRADE (AAO/SO(A)/SAS(Aoo)/SUPERVISION(A/c)/Sr AUDITOR/AUDITOR/CLERK/PS/STENO/MT/MT/DEO/LIBRARIAN/XITS/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:			
<p>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.</p>				
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)				
(To be filled by the Controller's office)				
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))	

FORMAT TO BE FILLED BY STATION SENIORS

(Original copy to be forwarded to HQrs.)

(Original copy to be forwarded to HQs.)						
1	ACCOUNT NO					
2	GENDER (Male/Female)					
3	NAME					
4	CATEGORY (GENERAL/OBC/SC/ST/PH)					
5	GRADE (AAO/SO(A)/SAS(App)/SUPERVISOR(A/c)/Sr.AUDITOR/AUDITOR/CLERK)					
6	DATE OF BIRTH (DD/MM/YYYY)					
7	DATE OF APPOINTMENT (In DAD) (DD/MM/YYYY)					
8	DATE OF PROMOTION (As Group 'C' in r/o Staff & SO(A) In r/o officer)					
9	ROSTER No. & CATEGORY (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)					
12	SERVICE PROFILE (In DAD)					
	Name of Office (Mention Sensltive assignment also)	Organisation	Whether on Sensitive Assignment (Yes / No)	Station	From Date (dd/mm/y yyy)	To Date (dd/mm/y yyy)
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					

ANNEXURE - 'A-2' (Contd.)

14	Whether EDP trained (If yes, specify project)			
15	APAR GRADING			
16	BRIEF GROUNDS FOR EXEMPTION (If requesting and as per Transfer Policy)			
Attach Latest Medical Certificate (NOT MEDICAL PRESCRIPTION) /Relevant certificate in other cases.				
DETAIL OF CERTIFICATE				
ISSUING AUTHORITY				
ISSUE DATE				
GROUND MENTIONED IN CERTIFICATE				
NAME MENTIONED IN CERTIFICATE				
RELATION WITH EMPLOYEE				
PERIOD OF EXEMPTION REQUESTED				
PREVIOUS EXEMPTIONS (if any)				
17	UNDERTAKING I hereby certify that the information furnished above are correct.			
18	Date: _____		(SIGNATURE OF APPLICANT)	
(ALL COLUMN ARE MANDATORY AS PER APPLICABILITY)				
(To be filled by the Controller's office)				
19	RECOMMENDATION (Yes/No)			
20	REASON (If Not recommended)			
21	Whether any disciplinary case is pending against the individual:			
22	Date: _____		(SIGNATURE AND SEAL OF GO(AN))	

(4)