### "हिन्दी भाषा राष्ट्र निर्माण में सहायक है"



कार्यालय रक्षा लेखा प्रधान नियंत्रक (मध्य कमान), करियप्पा मार्ग, लखनऊ छावनी -226002 Office of the Principal Controller of Defence Accounts (Central Command) Cariappa Road, Cantt., Lucknow, Pin Code - 226002 कार्यालय दूरभाष सं.-0522-2451084 कार्यालय फैक्स सं.-0522-2453038 Office Phone No. 0522-2451084 Office Fax No. 0522-2453038



#### E-mail ID: pcdaccan1a.dad@gov.in

प्रशा./1अ/1004/मुख्यालय/सीमा सड़क सेवा में.

परिपत्र

दिनाँक: - 20/10/2022

- 1- क्षेत्रीय प्रशिक्षण केन्द्र, लखनऊ
- 2- एकीकृत वित्तीय सलाहकार (म.क.), लखनऊ
- 3- संगठन के सभी उपकार्यालय
- 4- मुख्य कार्यालय के सभी अनुभाग

(केवल वेबसाइट के माध्यम से)

विषय: - Transfer Estt. DAD : Volunteers.

# संदर्भ:- मुख्यालय कार्यालय का परिपत्र संख्या AN-IX/9010/BR/2022 दिनाँक 18.10.2022

मुख्यालय कार्यालय ने रक्षा लेखा प्रधान नियंत्रक (सीमा सड़क), दिल्ली छावनी के अन्तर्गत नव स्थापित कार्यालयों AO 47 BRTF, Munsiari तथा AO 13 BRTF Padam में तैनाती के लिए स्वैच्छिक आधार पर स.ले.अ. तथा व.ले.प./ले.प./लिपिक के आवेदन आमंत्रित किया है।

आप के कार्यालय/अनुभाग में सेवारत ऐसे स.ले.अ. तथा व.ले.प./ले.प./लिपिक जो उक्त कार्यालयों में सेवा देने के इच्छुक है अपना आवेदन निर्धारित प्रारूप पर इस प्रकार प्रेषित करें की उनका आवेदन दिनांक 31.10.2022 तक इस कार्यालय में प्राप्त हो जाय।

निर्धारित तिथि के उपरान्त प्राप्त आवेदनों पर इस कार्यालय द्वारा विचार नहीं किया जाएगा और न ही इस सम्बन्ध में कोई अभ्यावेदन (Representation) स्वीकार किया जायेगा।

शून्य रिपोर्ट भी अपेक्षित है। वर्गाधिकारी (प्रशासन) द्वारा अवलोकित।

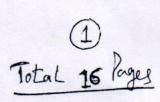
संलग्नक:- यथोपरि।

लेखा अधिकारी (प्रशासन)

### **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(App)/SUPERVISIOR(A/c)/Sr. AUDITOR/AUDITOR/G DEO/LIBRARIAN/MTS/DRIVER)	CLERK/PS/STENO/HT/JHT/						
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)	r						
9	ROSTER No. (Mandatory in case of AAO)			1				
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 & no	t Village or Sta	te)					
	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/yyy y)	To Date (dd/mm/yyy y)		
13	CHOICE STATION First Preference							
13	(Station (NOT Office)where DAD offices are located and BHUTAN/ PORTBLAIR							
	may not be opted as a separate panel exists for these stations)	Third Preferen	nce					



## Annexure 'A-1' (contd)

	Whether EDP trained (Yes/No) (If yes, specify project)			
	APAR GRADING	APARL	AFAR'S	AFA
(	Upto two decimal places)			
5 1	Brief Grounds for tranfer:			
	Attach latest MedicalCertificate (NOT MEDICAL PRESCRIPTION & TEST REPOR	TS) in respect	of medical case	s and Service
	Attach latest MedicalCertificate (NOT MEDICAL PRESCRIPTION & TEST REPOR certificate showing Station & Department from the employer in case of spous	TS) in respect e.	of medical case	s and Service
17	certificate showing Station & Department from the employer in case of spous  UNDERTAKING	TS) in respect e.	of medical case	s and Service
17	certificate showing Station & Department from the employer in case of spous	TS) in respect e.	of medical case	s and Service
	UNDERTAKING  It is to undertake that the information furnished above are correct.	e.	of medical case	
17	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date://20	(SIGNATI		
	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date://20	(SIGNATI		
	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date:/	(SIGNATI		
	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date:/	(SIGNATI		
18	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date:/20  (ALL COLUMNS ARE MANDATORY AS PER APPLIE  (To be filled by the Controller's office)  GROUND FOR RECOMMENDATION  (Hard Tenure Completion, Age, Physically Challenged %, Medical Self,	(SIGNATI		
18	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date://20  (ALL COLUMNS ARE MANDATORY AS PER APPLIE  (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	(SIGNATI		
18	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date:/20  (ALL COLUMNS ARE MANDATORY AS PER APPLIE  (To be filled by the Controller's office)  GROUND FOR RECOMMENDATION  (Hard Tenure Completion, Age, Physically Challenged %, Medical Self,	(SIGNATI		
18	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date:/20  (ALL COLUMNS ARE MANDATORY AS PER APPLIE  (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)	(SIGNATI		
18	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date://20  (ALL COLUMNS ARE MANDATORY AS PER APPLIE  (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	(SIGNATI		
18	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date:/20  (ALL COLUMNS ARE MANDATORY AS PER APPLIE  (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)	(SIGNATI		
18	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date:/20  (ALL COLUMNS ARE MANDATORY AS PER APPLIE  (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)	(SIGNATI		
19 20	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date:/20  (ALL COLUMNS ARE MANDATORY AS PER APPLIED  (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)  If Not recommended reason thereof	(SIGNATI		
19 20	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date://20  (ALL COLUMNS ARE MANDATORY AS PER APPLIE  (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)  If Not recommended reason thereof  Whether any disciplinary case is pending against the	(SIGNATI		
19 20	UNDERTAKING  It is to undertake that the information furnished above are correct.  Date:/	(SIGNATI		

(2)