

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@gmail.com

15 A YEARS OF CELEBRATING THE MAHATMA

परिपत्र (केवल वैबसाइट द्वारा)

सं. प्रशा./1अ/1004/मुख्यालय/रानीखेत-लैंसडाउन

दिनांक: 10.11.2020

सेवा में,

र.ले.नि.(क्षे.प्र.के.) लखनऊ (RTC Lucknow)
ए.वि.स.(म.क.) लखनऊ (IFA CC Lucknow)
संगठन के सभी उप-कार्यालय (All sub - offices of organisation)
मुख्य कार्यालय के सभी अनुभाग (All sections of Main Office)

विषय: स्थानांतरण र.ले.वि. स्थापना-रानीखेत -लैंसडाउन स्टेशन:व.ले.प./ले.प./लिपिक से स्वैश्चिक आवेदन। Sub:- Applications of volunteers for Ranikhet and Lansdown Station: Sr. Auditors/Clerks.

संदर्भ: मुख्या. कार्यालय का दिनांक 09/11/2020 का पत्रांक. स. AN/Estt. Others/10047/3/20. Ref: HQs. Office dated 09/11/2020 letter no. AN/Estt.Others/10047/3/20..

मुख्यालय कार्यालय ने उपरोक्त संदर्भित परिपत्र के माध्यम सेरानीखेत और लैंसडाउन स्टेशन पर तैनाती हेतु व.ले.प./ले.प./लिपिक से स्वैछिक आवेदन माँगे हैं। इच्छुक कर्मचारी इस परिपत्र के साथ संलग्न "Annexure-A-1" पर आवेदन कर सकते हैं। आवेदन इस कार्यालय में 20.11.2020 तक पहुँच जाने चाहिए।

Please refer to the above cited HQrs. Office circular, wherein it has been decided to invite applications of volunteers from Sr. Auditors/Auditors/Clerks for the Ranikhet and Lansdown station. Willing officers/officials may apply in the format enclosed as "Annexure-A-1" to this circular. The applications must reach this office by 20.11.2020.

- हरूता -संयुक्त नियंत्रक

प्रतिनिपि/Copy to :-प्रभारी अधिकारी स्वचलन कक्ष (स्थानीय) The Officer I/c OA Cell (Local

- र.ले.प्र.नि. (म.क.) लखनऊ की वैबसाइट पर अपलोड करने हेतु।

- For uploading on website of PCDA (CC) Lucknow.

लेखा अधिकारी (प्रशा.)



VOLUNTEER APPLICATION

(Original copy to be forwarded to HQrs.)

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exists for these stations)		exists for these stations)	Third Preference					



14	Whether EDP trained (Yes/No) (If yes, specify project)	
15	APAR GRADING	
	(Upto two decimal places)	
16	Brief Grounds for tranfer:	
	Attach lotest MedicalCertificate (NOT MEDICAL PRESCRIPTION &	
	certificate showing Station & Department from the employer in co	ose of spouse.
17	UNDERTAKING	
	It is to undertake that the information furnished above are of	orrect.
18	Date://20	(SIGNATURE OF APPLICANT)
	(ALL COLUMNS ARE MANDATORY AS	DED ADDITORDITY)
		ren Affel (Adient)
10	(To be filled by the Controller's office)	
19	GROUND FOR RECOMMENDATION (Hard Tenure Completion, Age, Physically Challenged %, Me	dical Solf
	Medical Dependent, Serving Spouse - As per DoPT Guldeline	
	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))
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