

"हर काम देश के नाम"



रक्षा लेखा प्रधान नियंत्रक (सेना) करियप्पा मार्ग, लखनऊ छावनी -226002

Principal Controller of Defence Accounts (Army) Cariappa Road,  
Lucknow Cantt.- 226002

कार्यालय फोन सं.-0522-2451084/कार्यालय फ़ैक्स सं-0522-2453038

Office Phone No.-0522-2451084/Office Fax No.-0522-2453038

Email ID - pcdaccan1a.dad@gov.in



(केवल वेबसाइट के माध्यम से)

परिपत्र

सं. प्रशा./1अ/1004/मुख्यालय/Volunteers

दि. 27.02.2024

सेवा में,

प्रभारी अधिकारी

- 1- मुख्य कार्यालय लखनऊ के सभी अनुभाग
- 2- सभी अधीनस्थ कार्यालय
- 3- क्षेत्रीय प्रशिक्षण केंद्र लखनऊ
- 4- एकीकृत वित्तीय सलाहकार (म.क.) लखनऊ

विषय: स्थानांतरण: रक्षा लेखा विभाग।

संदर्भ: मुख्यालय कार्यालय के दि. 27.02.2024 का पत्र सं-AN/IX/9010/Hard Station/2024 .

\*\*\*\*\*

उपर्युक्त संदर्भित पत्र के माध्यम से मुख्यालय कार्यालय द्वारा Hard Stations के लिए सहायक लेखा अधिकारियों / वरिष्ठ लेखा परीक्षकों /लेखा परीक्षकों /क्लर्क की तैनाती हेतु स्वैच्छिक आवेदन मांगा गया है।

2. इस संगठन के अंतर्गत तैनात ऐसे सहायक लेखाधिकारी /वरिष्ठ लेखा परीक्षक /लेखा परीक्षक /क्लर्क जिनकी सेवा वर्तमान स्टेशन पर 03 वर्ष पूर्ण हो गयी है तथा उनकी 05 वर्ष से अधिक का सेवा काल शेष हो , उक्त स्वैच्छिक स्थानांतरण हेतु आवेदन कर सकते है।

3. सभी प्रभारी अधिकारियों से अनुरोध है कि उक्त संबंध में प्राप्त स्वैच्छिक आवेदनों को इस प्रकार प्रेषित करें कि उनका आवेदन निर्धारित प्रारूप में इस कार्यालय को दिनांक-29.02.2024 तक प्राप्त हो जाए । उक्त तिथि के उपरांत प्राप्त आवेदनों पर विचार नहीं किया जाएगा।

—हस्ता.—  
वरि. लेखाधिकारी (प्रशा.)

प्रतिलिपि:

प्रभारी अधिकारी

स्वचलन कक्ष

(स्थानीय)

र.ले.प्र.नि.(सेना) लखनऊ की वेबसाइट पर अपलोड करने के लिए।

वरि. लेखाधिकारी (प्रशा.)



कार्यालय रक्षा लेखा महानियंत्रक

OFFICE OF THE CONTROLLER GENERAL OF DEFENCE ACCOUNTS

उलान बटार रोड, पालम, दिल्ली छावनी - 10

ULAN BATAR ROAD, PALAM, DELHI CANTT. 110010

Phone: 011-25665500/56

Fax: 011-25674777

email: admnix.cgda@nic.in

F. No. AN/IX/9010/HardStation/2024

Dated:-27.02.2024

To

All PCsDA / PIFAs / CsDA / IFAs  
(Through e-mail / WAN)

**Sub:- Volunteers for Hard Stations**

The Competent authority has decided to invite applications of volunteers from amongst AAOs/Sr.Adrs/Auditors/Clks, who have completed minimum 03 years at present serving station, for posting to the Hard stations (annexure enclosed).

2. The officials may also be informed that only those, who will be having a residual service of at least 05 years at the time of posting, will be considered for posting to the hard station. In case, the applicant has applied for transfer to some other station through the volunteer list/panel an endorsement may be made against his name in the remarks column of Annexure 'B-1'.

3. They shall invariably be repatriated to one of their three choice stations on completion of prescribed tenure. The order will be issued three months before completion of prescribed tenure.

4. The tenure of the individual will start from the date of joining at Hard station till completion of minimum prescribed period at that particular station. Any deviation from the stipulated period would be on exigency of service and only in exceptional circumstances.

5. The minimum physical stay will be 20 months for (02) years tenure and 10 months for (01) year tenure in terms of HQrs office letter No.AN/X/600/XIX/2009/PF Dated 26/10/2009

6. Individuals should apply for specific stations (priority-wise) as mentioned in annexure of this circular and will be posted at Hard stations subject to availability of present vacancies thereon considering other relevant factors including APAR Grading, Service Profile etc. It is also brought to the notice of all that a panel will be made in this regard from amongst all eligible volunteers and will be considered for posting as per the existing vacancies at Hard stations. The panel so made will remain valid till 30.06.2024. Hence, individuals, who once apply as volunteer for Hard stations will not be allowed to withdraw during the validity of panel of volunteer list.

7. It is, therefore, requested to forward the application (in original) of all the volunteers in Annexure 'A-1' only along with connected data in Annexure 'B-1' by 04.03.2024. Annexure 'B-1' and 'C' containing individual details & service profile may also be forwarded in MS Office Excel through E-mail (admnix.cgda@nic.in or admnx.cgda@nic.in).

(Navpreet Kaur)

Sr.Dy.CGDA (AN)

Copy to:- (i). IT&S Wing (Local) For necessary action please.

-----Sd-----

Satish Kumar Tripathi

SAO (AN)

## Annexure

AN/IX/9010/HardStation/2024 dtd 27.02.2024

Tentative vacancies upto Dec-2024

Station	Vacancy (AAO)	Vacancy (Staff)
AGARTALA	NA	1
AIZWAL	0	3
AKHNOOR	NA	2
ALONG	0	5
AWANTIPURA	NA	2
BARAMULA	NA	1
BHADORWAH	NA	1
BHUJ	1	10
DAHUNG	1	3
DAPORIJO	1	2
DHARANGADRA	1	2
DIMAPUR	1	12
IMPHAL	0	4
JAGDALPUR	0	1
JHAKHRI	NA	2
JOSHIMATH	0	6
Kalimpong	0	5
KARGIL	0	3
KARWAR	0	11
KHIRMU	0	4
KHUNDRU	NA	2
KOHIMA	1	3
KUPWARA	NA	2
LEH	7	60
LEIMAKHONG	NA	1
LEKHAPANI	NA	3
LIKABALI	NA	2
NAHARLAGUN	0	1
NALIYA	NA	2
PADAM	0	1
PANITOLA	0	3
PASSIGHAT	0	1
PINEGROVE	1	0
POONCH	NA	2
PORT BLAIR	5	37
RAJOURI	1	12
ROING	1	4
SAPPER	0	5
SELING	0	2
SRINAGAR	3	56
TAWANG	0	5
TENGA VALLEY	1	8
TEZU	0	5
UDHAMPUR	4	51
VERINAG	0	3
YING KIONG	0	3

6  
1

**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)/SA(AAO)/SUPERVISOR/ASST. AUDITOR/AUDITOR/CLERK/STENOGRAPHER/DEO/IBR/IN/MTS/JOIN/VER)				
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) y) To Date (dd/mm/yyyy) y)
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		

①

Total 75 Pages

14	Whether EDP trained (Yes/No) (If yes, specify project)	
15	APAR GRADING (Upto two decimal places)	
16	Brief Grounds for transfer:	
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.		
17	<b>UNDERTAKING</b>	
It is to undertake that the information furnished above are correct.		
18	Date: ___/___/20___	(SIGNATURE OF APPLICANT)
<b>(ALL COLUMNS ARE MANDATORY AS PER APPLICABILITY)</b>		
<b>(To be filled by the Controller's office)</b>		
19	<b>GROUND FOR RECOMMENDATION</b> (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))

4  
1

Name of Volunteersn from the Organisation - \_\_\_\_\_  
Annexure 'B-1'

SL NO	ACCOUNT NO	GENDER (M-Male F-Female)	NAME	CATEGORY	GRADE	DOB Date of Birth (dd/mm/yyyy)	DOA Date of Appointment (dd/mm/yyyy)	HOME TOWN (as per Srl. 9/of Annexure A)
1	2	3	4	5	6	7	8	9

(5)

3  
1

Annexure 'B-1' (contd)

STATION where Serving	SERVING DATE (dd/mm/yyyy)	Stay away DATE from choice1 (dd/mm/yyyy)	CHOICE1	CHOICE2	CHOICE3	EOP (“Y”-Yes/ “N”-No)	Whether appearin g in ensuing SAS Part- II	APAR1	APAR2	APAR3
								(Upto two decimal number)		
10	11	12	13	14	15	16	17	18	19	20

6

Annexure 'B-1' (contd)

GROUND (Tenure- Hard Tenure Completion, AGE- Above 58 years, PC- Physically Challenged (above 50%), MED. SELF- Medical Self, MED. DEP- Medical Dependent, SPOSE- As per DoPT Guideline, LADY, HOME TOWN, STAY AWAY)	CERTIFICATE ATTACHED (Yes / No) (Whether latest Medical Certificate (NOT A MEDICAL PRESCRIPTION)/ Spouse service Certificate attached	RECOMMENDATI ON (Y-Yes, N-No)	REASON, if not recommended reason thereof-	Remarks (Detail whether volunteered for any other Panel/HYL)
21	22	23	24	25



