#### **E-MAILMESSAGE**

सेवा में

एडीजी / एपीएस, उत्तर, दक्षिण एवं सभी खण्ड महानिरीक्षक

प्रेषक

महानिदेशक के औसुब मुख्यालय नई दिल्ली

ई—16015 / 01 / Misc Depu/2013/Vol.III/Estt.II- े ५ रे दिनाकं ्रे /07 / 2021 FILLING UP OF POSTS OF ACCOUNTANT PURELY ON TRANSFER ON DEPUTATION BASIS IN O/O PRINCIPAL CHIEF CONTROLLER OF ACCOUNTS (HOME) (.) IT HAS BEEN DECIDED TO SPONSOR ASI/MIN ON DEPUTATION BASIS TO FILLUP THE POST OF ACCOUNTANT IN THE OFFIE OF THE PRINCIPAL CHIEF CONTROLLER OF ACCOUNTS (HOME) (.) THE DETAILS ARE AS UNDER:-

S. No.	NAME OF THE POST	Grade/Classification and Pay Matrix/pre-revised pay band/Grade Pay Age Limit
01	ACCOUNTANT	General Central Service, Group-C (Non-Gazetted) Ministerial  LEVEL-5 IN THE PAY MATRIX {Pay Band-I, Rs. 5200-20200 + Grade Pay Rs. 2800/- (Prerevised)
		Maximum Age : 56 years

APART FROM THE ABOVE THE FOLLOWING ARE THE ELIGIBILITY CRITERIA:

- I) COMPLETED 16 YEARS OF SERVICE.
- II) NOT AWARDED ANY MAJOR/MINOR PUNISHMENT DURING SERVICE
- III) CLEAR FROM DE/VIGILANCE ANGLE
- IV) NAMES OF PERSONNEL ALREADY SELECTED/SPONSORED FOR DEPUTATION TO OTHER ORGANIZATION WILL NOT BE ELIGIBLE.

IT IS REQUESTED THAT THE OFFER MAY BE CIRCULATED IN FIELD FORMATIONS AND NOMINATIONS OF WILLING AND ELIGIBLE ASI/Min @ 1 FROM ALL SECTOR MAY BE SENT IN THE FOLLOWING FORMAT DULY SIGNED (IN MS-EXCEL) ALONGWITH FOLLOWING DOCUMENTS SO AS TO REACH AT THIS DTE BY 20.07.2021 REPEAT BY 20.07.2021 POSITIVELY IN CONSOLIDATED MANNER:-

- I) BIO-DATA IN THE PRESCRIBED PRO-FORMA (AS PER ANNEXURE-II) DULY SIGNED BY THE CANDIDATE AND COUNTERSIGNED BY THE COMPETENT AUTHORITY;
- II) COPIES OF APAR/ACRS FOR THE LAST 5 YEARS DULY ATTESTED ON EACH PAGE;
- III) DE/VIGILANCE/SEXUAL HARASSMENT CLEARANCE & INTEGRITY CERTIFICATE.

IT MAY ALSO BE ENSURED THAT THE <u>NOMINATION SHOULD NOT BE SENT IN PIECEMEAL/INCOMPLETE MANNER</u> (.) NOMINATIONS NOT ROUTED THROUGH SECTOR ISG OR RECEIVED WITH INCOMPLETE RECORDS OR RECEIVED AFTER DUE DATE WILL BE SUMMARILY REJECTED (.) IT MAY ALSO BE ENSURED THAT THE NOMINATION SHOULD NOT BE SENT IN EXCEES OF THE PRESCRIBED LIMIT ALLOTTED TO SECTOR ISG (.) FURTHER, IT SHOULD BE

# ENSURED THAT WHILE FORWARDING THE NOMINATIONS TO THIS DTE, NO ELIGIBLE SENIOR NOMINATIONS IS LEFT OUT IN THE NOMINATIONS RECEIVED FROM UNITS (.)

S.NO PSL CI		L   0101 110   110		Name	DD/MM/YYYY DD/MM/YYYY			DOP in the present rank DD/MM/YYY YY M		Total Service YY MM
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)

Edu. Qul.	State	Punishment details (Major in entire service & Minor in last 10 years	Grading (Last 05	Details of previous deputation/UN Mission (Nepal/Haiti/ Dhaka etc)	Area	SHAPE category with date	Course Done	Basic Pay and Level	Remarks
(12)	(13)	(14)	(15) 2016- 2017- 2018- 2019- 2020-	(16)	(17)	(18) SHAPE Dt.	(19)	(20) BP: Level:	(21)

[NOTE: ALL THE ABOVE PARTICULARS MAY BE GIVEN IN SINGLE CELL AND DATE SHOULD BE MENTIONED AS **DD/MM/YYYY** (.) NOMINATIONS MAY BE FORWARDED IN SOFT COPY TO aigestt@cisf.gov.in and ac-esttii@cisf.gov.in AND HARD COPY MAY ALSO BE SENT TO THIS DTE. (.) **NIL REPORT IS ALSO REQUIRED** (.) MSG OVER////

(महेन्द्र कुमार यादव)

सहायक महानिरीक्षक / स्था0

Internal AIG/ADM

Request to forward the nomination of personnel posted in FHQ in the rank of ASI/Min @ 1 and nominations of attached personnel may be routed through concerned Sector HQrs.

AIG/TECH, EDP CELL – To place in CISF web site under latest news column.

THE FORMAT OF APPLICATION Name of applicant with designation and complete office address(in block letters), e-mail & telephone no./Mobile No. Present Pay Level/Pay Band & Photo Grade Pay Date of Birth (in Christian Era) i) Date of entry into Government ii) Date of retirement under Central/State Government Rules Educational Qualification

7. Details of Employment, in chronological order. Enclose a separate sheet duly authenticated by your signature, if the space below is insufficient.

Other Qualification, if any

Office	Post held on regular basis	From	То	Level in Pay Matrix/Pay Band & Grade Pay of the post held on regular basis	Nature of duties(in detail) highlighting experience required for the applied post
08 Details of					F

08. Details of ACP/MACP with present Pay Level/ Pay Band & Grade Pay where such benefits have been drawn by the Candidate, may be indicate

Office Level in Pa		Candidate, may	be indica	ted as below:-		and oddin oddicing
	ilice	Level in Pay	Matrix/	From	To	
		Pay Band &	Grade		10	
		Pay drawn	under			
-		ACP/MACP S	cheme			
-	T ***		_	ä	_	5
09		or Temporary				
10	procont	employment is				
	held on deputation	basis, please				9
	state:-					
	a) The date of initial	appointment				
	b) Period of appoints	nent on				*
	deputation					
	c) Name of the paren	t Office				
	organization to wh	nich the				
	applicant belongs	- "" a				- ,
	d) Name and pay of t	he post held				1.0
	in substantive capa	acity in the				
	Parent organizatio	n.				, · ·
,	Note: In case of of	ficers already				a, 5 / -
	on deputation, the a	application of		*		× , , , , , , , , , , , , , , , , , , ,
	such officials should	be forwarded				
	by the parent cadi	re/department				
	along with cadre c	learance and				
	integrity certificate	and and				

under (indicate the name of your	
employer against the relevant	
column)	
a) Other organized Accounts	
Services	
b) Central Government	
c) State Government	
d) Autonomous Body full funded	ag - houseking all?
by Central or State Government	♠ 1
	. *
Additional information, if any,	
relevant to the post you applied for	
in support of your suitability for	
the post.	
(Note: Enclose a separate sheet, if	
the space is insufficient)	
Whether belongs to SC/ST	
	employer against the relevant column)  a) Other organized Accounts    Services b) Central Government c) State Government d) Autonomous Body full funded    by Central or State Government  Additional information, if any, relevant to the post you applied for in support of your suitability for the post. (Note: Enclose a separate sheet, if the space is insufficient)

I have carefully gone through the vacancy circular/advertisement and I am well aware that the information furnished by me in the Curriculum Vitae is correct and true to the best of my knowledge and no material fact having a bearing on my selection has been suppressed/withheld.

(Signature of the Candidate)

Date	

**Note:** The decision to accept or reject any application shall rest solely with this office and the applicant shall have no claim whatsoever.

#### Declaration by Applicant

- 2. I will not claim absorption in DAO, MHA in the said post.
- 3. I am liable to be repatriated to my parent organization for any inaccuracies in the details noted above or the contravention of any provisions in the rules/ orders governing the deputation.

Date:-

Place:-

(Signature of the Candidate)

### (4")

## CERTIFICATE TO BE RECORDED BY EMPLOYER/CADRE CONTROLLING AUTHORITY WHILE FORWARDING THE APPLICATION

- 1. Certified that the particulars furnished by the applicant are true and have ben verified from the service records.
- 2. The applicant, if selected, will be relieved immediately.

Date :-

- 3. Attested copies of ACR/APAR for the last five years are enclosed.
- 4. The record of the service of the official has been carefully scrutinized and it is certified that there is no doubt about his / her integrity.
- 5. It is certified that no disciplinary / vigilance case is either pending or contemplated against the applicant and he / she is clear from Vigilance angle.
- 6. It is certified that no Major / Minor penalty has been imposed or contemplated on him/ her during the last 10 years.

Place:-				
	Signature of	controlling	Authority	 
	Name			
	Official Seal			,

Note:- All terms & conditions of deputation/ foreign service will be followed as per DOP&T OM No.6/8/2009-Estt.(Pay II) dated 17.06.2010 and its amendments issued time to time.