OFFICE OF THE COMPTROLLER AND AUDITOR GENERAL OF INDIA, NEW DELHI.

No. 19-9 – Staff (App)-I/05-2022/Vol.II Dated: 13/10/2022

To

- 1. All the Heads of Department in IA&AD
- 2. Director (P).

Subject: Filling up the post of Accounts Officer (Level 09) in Department of Fertilizers, New Delhi on deputation basis.

Sir / Madam,

I am directed to intimate that Department of Fertilizers, New Delhi has intimated to fill up post of Accounts Officer (Level 09) of pay matrix on deputation basis. Maximum age limit shall not exceeds 56 years as on the closing date of receipt of application.

2. The eligibility conditions are as under:-

Name of post	Pay Scale	Eligibility Criteria		
Accounts Officer	Level 09	i) AAO with 05 years of service.		
	26.61.07	ii) SAS passed officials with 05 years of service.		

- In this regard, it is requested to kindly recommend the names of eligible officers who are willing and can be spared immediately in the event of their selection for the post of Accounts Officer in Level 09 on deputation basis after following the provisions given in Deputation Policy for non-IA&AS Officers for deputation outside IA&AD as circulated vide circular No. 1050-Staff (App)-I/05-2022 dated 28.06.2022. The recommendations accompanied with the following documents / certificates may kindly be sent to the Asstt. Comptroller and Auditor General (N)-I latest by 10/11/2022:
 - i. Application (in duplicate) only in the prescribed proforma (proforma enclosed) of willing and eligible Candidates with certification by employer.
 - ii. Duly attested copies of each page of APARs for the last 5 years (2017-18 to 2021-22).
- iii. Latest vigilance certificate, integrity certificate and CR dossiers
- 4. Applications received after 10/11/2022 will not be considered under any circumstance.
- 5. In case of selection, the candidate will not be allowed to withdraw the application. In case of withdrawal of willingness after selection, the candidate will be debarred from applying to the deputation for 03 years from the date of communication of the selection by the borrowing department.

Encls:-As above.

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Yours faithfully,

R.K. Tiwari)

Sr. Administrative Officer Staff (App)-I

BIO-DATA PROFORMA

1.	Name & Address in E	Block letters					
2.	Date of Birth (in Chris	stian era)	***				
3.	Date of retirement under Central/State Government rules						
4.	Educational Qualifica	ations	•••	•••			
5.	Whether Educational and other qualification required for the post are satisfic any qualification has been treated as equivalent to the one prescribed in the state the authority for the same)						
	Qualifications/ Experience required		Qualifications/ Experience possessed by the officer				
Esse	ntial (1) (2) (3)						
Desi	rable (1) (2)						
6.	Please state clearly the requirements of		he light o	of entries made by you	above, you me		
7.	Details of Employn authenticated by yo	nent, in chroi ur signature, i	nological if the spa	order: Enclose a sep ce below is insufficient.	arate sheet, du		
Offic	ce/Instt./Orgn. Post	Held Fro	m To	Scale of pay and basic pay duties	Nature of		
			<u> </u>				

8.	Nature of present employment, i.e. ad hoc or temporary or permanent.							
9. h	In case the present employment is held on deputation/contract basis, please state							
·' -	 (a) The date of initial appointment (b) Period of appointment on deputation/contract (c) Name of the parent office/organization to which you belong. 							
10.	Additional details about present employment please state whether working under							
(a) (b)	Central Government State Government							
(c)	Autoroperator Civillantian							
(d)	Government Undertaking							
(e)	Universities							
11.	Are you in Revised Scale of Pay ? If yes, give the date from which the revisitook place and also indicate the pre-revised scale	on						
12.	Total emoluments per month now drawn							
13.	Additional information, if any, which you would like to mention in support of your suitability for the post/ Enclose a separate sheet, if the space is insufficient.							
14.	Whether belong to SC/ST							
15.	Remarks							
	Signature of the Candida	atė						
	Address							
Date								
	tersigned							