Inward Dy, SL.MO-20, dr 10/8/25



प्रधान महालेखाकार (लेखापरीक्षा - I) का कार्यालय, ओडिशा, भुवनेश्वर OFFICE OF THE PRINCIPAL ACCOUNTANT GENERAL (AUDIT-I) <u>ODISHA: BHUBANESWAR</u>

Circular No.18

Date: 09.07.2025

विषय: कल्याण सहायक के पद के लिए स्वयंसेवकों की मांग। Sub: Calling for volunteers for the Post of Welfare Assistant.

परिपत्र संख्या 07 दिनांक 09.06.2025 में आंशिक संशोधन करते हुए, कल्याण सहायक के पद के लिए पात्रता मानदंड को वरिष्ठ लेखा परीक्षक के स्थान पर वरिष्ठ लेखा परीक्षक और सहायक पर्यवेक्षक पढ़ा जाए।

वरिष्ठ लेखा परीक्षक और सहायक पर्यवेक्षक के पद पर तीन (03) वर्षों की संयुक्त नियमित सेवा वाले अधिकारी कल्याण सहायक के पद पर प्रतिनियुक्ति के लिए विचार किए जाने के पात्र हैं। अपेक्षित योग्यता रखने वाले अधिकारी निर्धारित प्रपत्र (संलग्न) में उचित माध्यम से अपनी इच्छा प्रस्तुत कर सकते हैं, ताकि प्रधान महालेखाकार (लेखा परीक्षा-I), ओडिशा, भुवनेश्वर कार्यालय के प्रशासनिक अनुभाग में 18.07.2025 तक पहुँच जाए। जिन अधिकारियों ने पहले ही परिपत्र के प्रत्युत्तर में अपना आवेदन जमा कर दिया है, उन्हें पुनः आवेदन करने की आवश्यकता नहीं है।

परिपत्र संख्या 07 दिनांक 09.06.2025 की अन्य सभी शर्तें अपरिवर्तित रहेंगी।

In partial modification to Circular No. 07 dated 09.06.2025, the eligibility criteria for the post of Welfare Assistant may be read as Senior Auditors and Assistant Supervisors instead of Senior Auditors.

Officials with combined regular service of three (03) years in the grade of Senior Auditor and Assistant Supervisor are eligible to be considered for deputation for the post of Welfare Assistant. Officials having requisite eligibility may submit their willingness, in the prescribed proforma (Attached) through proper channel, so as to reach the Admin Section of Office of the Principal Accountant General (Audit-I), Odisha, Bhubaneswar latest by **18.07.2025**. Officials who have already submitted their application in response to earlier circular need not apply again.

All other conditions of the Circular No. 07 dated 09.06.2025 remain unchanged.

हस्ता/-वरिष्ठ लेखा परीक्षा अधिकारी/प्रशासन Senior Audit Officer/ Admn

No. Admn. (Audit-I)/Gen/39/Corr./Welf.Asst./2025-26/862

Copy forwarded for information and necessary action to: -

- 1. Secretary to Pr. Accountant General (Audit-I), Odisha, Bhubaneswar.
- 2. Secretary to Accountant General (Audit-II), Odisha, Bhubaneswar.
- Steno to Sr. DAG/ DAG (Admin, AMG-I, AMG-II, AMG-III, AMG-IV, AMG-V), O/o the Pr. Accountant General (Audit-I), Odisha, Bhubaneswar.
- 4. Steno to DAG (Admin), O/o the Accountant General (Audit-II), Odisha, Bhubaneswar.
- 5. Steno to DAG (AMG-II), O/o the AG (Audit-II), Odisha, Branch: AMG-II, Puri
- 6. Steno to Deputy Director, O/o the DGA Central, Hyderabad, Branch at Bhubaneswar.
- All Senior Audit Officers of Group Controlling Sections of O/o Pr. AG (Audit-I), Odisha, Bhubaneswar with request to circulate copies of this circular in the entire Group including Field Parties.
- 8. Sr. Audit Officer/ Admn, O/o the AG (Audit-II), Odisha, Bhubaneswar with request to circulate copies of this circular in the entire Group including Field Parties.
- 9. Sr. Audit Officer/ Admn, O/o the DD/CRA, Odisha, Bhubaneswar with request to circulate copies of this circular in the entire Group including Field Parties.

10. AAO/ DA&RC to upload in the office website.

11. Circular Guard File/ Notice Board.

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वरिष्ठ लेखा परीक्षा अधिकारी/प्रशासन Senior Audit Officer/Admn

FORMAT OF APPLICATION FOR DEPUTATION TO WELFARE ASSISTANT

:

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- 1. Name in Full (in Block Capitals)
- 2. Designation
- 3. Date of Birth

4. Section and Office where working

5. Present Pay in the Pay Matrix

- 6. Date of continuous appointment
- 7. Serial number in Gradation List of 03/24
- 8. Date of Promotion to the present cadre
- 9. Total Service rendered in the cadre of Senior Auditor and Assistant Supervisor
- Details of Experience in the field of Welfare : Activities / Community Services/ House Keeping / Sports participation / Cultural Activity/Personnel Administration/Settlement of personal claims.

(Photo copies of certificates, if any, as proof may be attached). In case space is not sufficient, a separate sheet may be attached.

Date.....

Signature of the applicant