



क्रमांक /NO WM-I/Deputation/PIU/Ow. No

प्रधान महालेखाकार कार्यालय(लेखा एवं हकदारी), गुजरात, अहमदाबाद शाखा

लेखा परीक्षा भवन नवरंगपुरा अहमदाबाद – 380009

Office Of The Pr. Accountant General (A&E) Gujarat,

“ Audit Bhavan” Navrangpura, Branch Ahmedabad- 380009

दिनांक / Date:-

**CIRCULAR No. WM-I/19 DATE:-29/12/2022**

Applications are invited for services of officials of DA cadre (Sr DAO, DAO-I, DAO-II) on deputation basis to the Project implementation units (Health) under State Government, Health and family welfare Department, Government of Gujarat.

Project Implementation Unit (Health) (under State Government) Health & Family welfare department has been established to implement health infrastructure projects across the State of Gujarat which includes construction of Medical college, teaching hospital, super specialty hospital, district and sub district hospital. PIU is following public work procedure as followed by State R&B Department. The posts are at Gandhinagar, Ahmedabad, Surat, Vadodara, Rajkot, Jamnagar, Bhavnagar, Dahod, Rajpipla, Navsari, Mehsana and Bhuj. It may please be noted that request for preference of place does not entitle you to any particular posting which will be decided on administrative convenience and consideration.

Officers who are willing to be considered for the deputation may intimate their willingness in writing to this office along with details filled in attached proforma via email [ag-ahmd-guj@nic.in](mailto:ag-ahmd-guj@nic.in) latest by 06/01/2023. Minimum period of deputation shall be for two years.

-Sd/-

**Sr. Accounts Officer/WM-I**

Copy to:-

1. Officials of the Sr. Divisional Accounts Officer/DAO-I/DAO-II Cadre
2. PA To DAG (A&E)
3. Sr.AO/ITS with a request to upload in the website of this office
4. Guard File

*Radhika*  
**Sr. Accounts Officer/WM-I**

**PROFORMA OF APPLICATION FOR DEPUTATION**

1.	Name and address ( in Block letters)	
2.	Designation	
3.	District to which request is made	1.
		2.
		3.
4.	Date of Birth	
5.	Date of Retirement	
6.	Educational Qualification	
7.	Date of initial appointment	
8.	Name of parent office/ organization	
9.	Name of present office	
10.	Experience as Divisional Accountant	
11.	Present Pay ( Level and Index )	
12.	Whether belongs to SC/ST/OBC	
13.	Additional information	

Signature of the Applicant  
Name  
Tel/Mob No  
E-Mail Id:-