

Preference of Station

1. _____
2. _____
3. _____

PROFORMA

1. Name
2. Date of Birth & Date of Retirement
3. Designation
4. Office where working
5. Date of Posting & Tenure in the Ministry
6. Whether covered under the inter-Ministry transfer criteria under RTP of DOP&T(i. e. 7 Years)
7. Date from which the present post held on regular/ad-hoc basis including Rank No./Year of Exam/Select List Year
8. Details of posting outside Delhi in all the grades held in the past.
9. Details of posting till date including period of deputation, if any.
10. Details of Spouse if working in Govt.
11. Home Town of the candidate
12. Details of dependent family member, age-wise
Details of Physically challenged dependent Family Members, if any (attach proof).
13. Reasons for seeking transfer

Signature of officer concerned
with date & Mobile No.

Signature and Stamp of verifying officer

**Forwarding office should ensure that the applications are forwarded after obtaining approval of Competent Authority as mentioned in para-3 of this OM.*

***Concerned controlling officer in Secretariat and Administrative offices of attached/subordinate offices must also ensure that the application is forwarded to this Ministry as duly scanned E-receipt in E-office.*