

GOVERNMENT OF NCT OF DELHI
DIRECTORATE OF AUDIT
(Administration Branch)

4th Level, C-Wing
Delhi Sectt.
New Delhi

Sub: - **Common Assistant Accounts Officer (Civil) Examination 2017 (Part-I & II) – regarding.**

Please find enclosed a copy of DCA (Admn), Principal Accounts Office Letter No. F.4(1)/SAS/Pr.AO/A-II/2017/2566-2576 dated 04/09/2017 on the above cited subject with the request to bring the contents to the notice of all the officials working in their respective branches for information and it must be ensured that the applications of the eligible and desirous candidates, in prescribed proforma, must reach to the undersigned by 25/09/2017 positively for onward timely submission to the Principal Accounts Office.

Encl : as above



(KULGEET SINGH)
CONTROLLER OF ACCOUNTS (AUDIT)
TEL. NO. 23392281

All the Branch Incharges
Directorate of Audit,
GNCT of Delhi.

No. F. 9(12)/DOA/Estt./2011/7815-19

Dated: 11-9-17

Copy to:

1. AAO (Audit)/Nodal Officer (Website)
2. Notice Board
3. All the officials working in diverted capacity
4. Guard file

(5/3)

**APPLICATION FOR COMMON A.A.O. (PART-I) EXAMINATION
GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI**

PART-I

**STAPLE YOUR
TWO RECENT
PHOTOGRAPHS
HERE**

**PASTE YOUR
RECENT
PHOTOGRAPH
HERE (DULY
ATTESTED
PHOTO)**

1. NAME OF THE CANDIDATE (in BLOCK letters) : _____
2. Father's/Husband's Name : _____
3. Date of Birth : _____
4. Age as on 01.04.2017 : _____
5. Whether SC/ST : _____
6. Present Post held : _____
7. Full Address of office : _____
: _____
: _____
: _____
: _____
- Telephone No. of Office : _____
8. Full Residential Address : _____
: _____
: _____
: _____
: _____
- Telephone No. of Residence : _____
9. Number of chances already availed in Common AAO part-I Examination : _____
10. Month & Year when appeared in Part-I and the Index number allotted on each occasion:

S.No.	Month/year	Index No.	S.No.	Month/Year	Index No.
1.			4.		
2.			5.		
3.			6.		

5/9

39/2

12. Details of exemption secured in Part-II Examination:

S.No.	Subject	Index No.	Month/Year	Marks Obtained
1.				
2.				
3.				

13. Date of Entry in Govt. Service & Designation : _____

14. Cadre to which belongs: _____ Seniority No. _____

15. Details of promotions got and period of service on each post, since initial joining in Govt. service :

S.No.	Name of the post	Pay Scale	Date of joining the said post
1.			
2.			
3.			
4.			

16. Whether received training conducted by Controller of Accounts, Govt. of NCT of Delhi (Yes/No) : _____

17. I certify that the above particulars are correct. I further certify that I have gone through the scheme of Common A.A.O. Examination of Govt. of NCT of Delhi and agree to abide by the provisions of the scheme/Rules on the subject.

Signature of the Applicant

(Name & Designation)

Office Address : _____

Telephone No.: _____

(FOR USE IN THE OFFICE WHERE THE CANDIDATE IS WORKING)

1. Certified that the information given in the application by Sh./Smt./Km. _____ Designation _____ of this Office/Department has been verified with reference to the service records and is correct.

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9

**APPLICATION FOR COMMON A.A.O. (PART-II) EXAMINATION
GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI**

PART-II

STAPLE YOUR
TWO RECENT
PHOTOGRAPHS
HERE

PASTE YOUR
RECENT
PHOTOGRAPH
HERE (DULY
ATTESTED
PHOTO)

1. NAME OF THE CANDIDATE (in BLOCK letters) _____
2. Father's/Husband's Name _____
3. Date of Birth _____
4. Age as on 01.04.2017 _____
5. Whether SC/ST _____
6. Present Post held _____
7. Full Address of office _____

- Telephone No. of Office _____
8. Full Residential Address _____

- Telephone No. of Residence _____
9. Year of passing Part-I with Index No. _____
10. Number of chances already availed in Common AAO part-II Examination _____
11. Month & Year when appeared in Part-II and the Index number allotted on each occasion:

S.No.	Month/year	Index No.	S.No.	Month/Year	Index No.
1.			4.		
2.			5.		
3.			6.		

7
9

2007

2. Recommendation of the Head of Office with regard to the :-

- (i) Work : _____
- (ii) Conduct : _____
- (iii) Whether disciplinary proceedings are Pending/contemplated : _____
- (iv) Fitness of the applicant for appearing in Common A.A.O. Part-I Examination: _____

(SIGNATURE OF THE HEAD OF OFFICE)

Name : _____

Telephone No. _____

SEAL OF THE OFFICER

(8/9)

11. Details of exemption secured in Part-I Examination:

S.No.	Subject	Index No.	Month/Year	Marks Obtained
1.				
2.				
3.				

12. Whether passed Part-II Examination (if yes)
Year of passing with Index Number _____
13. Date of Entry in Govt. Service & Designation _____
14. Cadre to which belongs: _____ Seniority No. _____
15. Details of promotions got and period of service on each post, since initial joining in Govt. service :

S.No.	Name of the post	Pay Scale	Date of joining the said post
1.			
2.			
3.			
4.			

16. Whether received training conducted by Controller of Accounts, Govt. of NCT of Delhi (Yes/No) : _____
17. I certify that the above particulars are correct. I further certify that I have gone through the scheme of Common A.A.O. Examination of Govt. of NCT of Delhi and agree to abide by the provisions of the scheme/Rules on the subject.

Signature of the Applicant

(Name & Designation)

Office Address : _____

Telephone No.: _____

(FOR USE IN THE OFFICE WHERE THE CANDIDATE IS WORKING)

1. Certified that the information given in the application by Sh./Smt./Km. _____ Designation _____ of this Office/Department has been verified with reference to the service records and is correct.

($\frac{7}{9}$)

(89/0)

2. Recommendation of the Head of Office with regard to the :-

- (v) Work _____
- (vi) Conduct _____
- (vii) Whether disciplinary proceedings are Pending/contemplated : _____
- (viii) Fitness of the applicant for appearing in Common A.A.O. Part-II Examination: _____

(SIGNATURE OF THE HEAD OF OFFICE)

Name : _____

Telephone No. _____

SEAL OF THE OFFICER