

ANNEXURE – B

PROFORMA FOR APPEAL

1	Name & PEN Number	
2	Designation	
3	Present Station	
4	Date of Birth	
5	Qualification	
6	Details of Regular appointment (a) Method of appointment (b) PSC advice No & Date (If more than one PSC appointment last PSC advice No & Date should be noted)	
7	IDT details (a) Order No of IDT (b) District to which transfer (c) Date of joining in the new District	
8	Details of Declaration of probation (Order No, Date & Date of effect of probation) (copy should be attached)	
9	Details of LWA if any (a) Period of LWA (b) Sanction order no & date (c) Date of rejoining after LWA	

10	Reason for appeal	
11	Mobile No.	
12	Mobile No Section Clerk (CHC/PHC)	

Date

Signature of the incumbent

Certified that the service particulars furnished above are verified with respective service register and relevant records and found correct.

Signature of the Head of the Institution

Counter signature of DMO (H)

Annexure – C

**Proforma for preparation of Seniority List of Lab Technician Gr. II in Health
Services Department as on 01.01.2017 TO 31.12.2019**

I General Details

- a. Name (In Capital) :
- b. PEN Number :
- c. Designation :
- d. Present Station with District :
- e. Date of Birth :
- f. Qualification (General and Technical) :

II. Appointment details :-

- a. PSC Advice No & Date :

(If more than one PSC appointment, the last
PSC Advice No & Date should be noted,
copy of advice should be attached)

- b. District

- c. Appointment Order No. and Date. :

(Copy of order should be attached)

III. Service Details :-

- a. Date of joining in the entry cadre :

- b. Whether availed extension of joining time, :
if so
 - i. Period :

 - ii. Date of Joining duty :
(Attach copy of order)

- c. whether probation declared, if so :
 - i. Order No with date & Date of effect :
of probation
(copy of order should be attached)

IV. Whether availed Inter District Transfer, If so

- a. Order No & Date :

- b. District which transfer :

- c. Date of joining in the new district :

V. Details of LWA if any :-

- a) Period of LWA :

- b) Sanction Order No. and Date :

- c) Purpose

- d) Date of rejoining after LWA :

VI. Mobile No of the incumbent :

VII. Phone No of the Present Institution :

VIII. Mobile No. of the section clerk (CHC/PHC):

IX. Any other relevant information :

Date:

Signature of the incumbent

Certified that the service particulars furnished above are verified with respective service register and relevant records and found correct.

Signature of Head of Institution

Counter Signature of DMO(H)