





Commissionerate of Collegiate Education

Application For Absorbed Staff Posting Request Form - Teachers

Acknowledgement

Notification for:	For the Posting of Absorbed staff - Teachers	 
Application Number:	12021092800617	
Name:	JASMINE Kondamudi	
Father / Guardian Name:	K MAHIMANANDARAO	
Date of Birth :	14-08-1969	
Age as on the date of Notification:	52	
Gender :	Female	
Mobile No. :	8790810084	
Email Address :	ajasmine.kondamudi@gmail.com	
PH Category	No	
CFMS ID	14454281	
College	GDC TIRUVURU	
Zone	ZONE-2	
District	KRISHNA	
Subject	Hindi	
Designation	Regular Lecturer	
CFMS ID	14454281	
DOJ as admitted into Grant-in-aid	20-Jun-1996	
Date of Absorbed into Government	01-Sep-2021	
Absorbed from which college	MONTESSORI MAHILA KALASALA, VIJAYAWADA	

Entitlement Points

Note: Transfers will be affected from focal to non-focal / non-focal to non-focal /non-focal to focal posts. In no case, transfers will be from one focal post to another focal post in case of Non Autonomous Colleges. And Principal will cross verified the Preferences options and confirm the application(Because Focal to focal transfers posts are not eligible)

(a) Stay in the present station located in the following Areas as on 01.07.2021	In respect of those who are drawing UGC Scales of 2016 :	Category I (16% and above HRA) Municipalities, Corporations, Cities, etc(Focal)
	In respect of those who are drawing State Pay Scales, 2015 :	Category I (20% HRA) Municipalities, Corporations, Cities, etc.,(Focal)
	Employees who working in ITDA Areas :	No
(b) Special Categories	i) Single Woman :	No

<p>Note: For this purpose, a copy of the certificate issued not below the rank of the civil surgeon must be submitted.</p>	ii) Physically Challenged:	None
	iii) The employees who are suffering from the following diseases: Cancer, Heart Disease, Neuro – Surgery, Kidney transplantation , Bone TB	No
	iv) a) Applicants with dependent children who are mentally retarded and or under treatment	No
	b) Applicants with dependent children suffering from juvenile diabetes and children suffering from congenital heart problems and are under medical treatment available only at specified places to which they are seeking transfers Note: For this purpose, a copy of the certificate issued by the competent authority, i.e., District Medical Board/ State Medical Board may be enclosed for consideration.	No
	v) Spouse employment (Only one of the spouses shall be shifted following the prescribed procedure) Note: Employees whose spouse is working in state or central Government or Public Sector undertaking or Local Body or Aided Institution in the same place opted for transfer or a nearby place. The applicants seeking transfer under this category shall produce a certificate issued by the Head of the Office where the spouse is working in proof of the claim.	No

Declaration:

I, Smt / Kum / Sri **JASMINE Kondamudi**, D/o,S/o **K MAHIMANANDARAO** certify that above particulars furnished by me are correct to the best of my knowledge. I also agree that in the event of any of the particulars furnished in my application being found to be incorrect or false at later date my candidature will be cancelled summarily.



Signature Of the Candidate

- For any Claims and Objections : claimsandobjections.cce@gmail.com