



Government Medical College & Its Associated Hospitals Srinagar

CIRCULAR

Subject:- Furnishing of information for seeking Vigilance Clearance through "Online Electronic Vigilance Clearance Portal".

Ref:- GAD's O.M No. GAD VIGOADM/9/2021/04 dated 23-06-2021

In order to seek vigilance clearance through "Online Electronic Vigilance Clearance Portal" as per General Administration Department's O.M quoted above, it is impressed upon all the concerned officers/ officials annexed -A to this circular, to furnish the requisite information as per format annexed-B within a period of seven (07) days positively through proper channel.

Riyaz Ahmad Wani (KAS)
Administrator
Associated Hospitals Srinagar

Dated:- 22-09-2021.

NO:- MC /AH-9/Est-II/2021/ 4561-60
Copy for information and necessary action to the:-

01. Medical Superintendent Govt. _____ Hospital Srinagar.
02. Chief Accounts Officer Govt. Medical College Srinagar.
03. Accounts Officer Associated Hospitals Srinagar.
04. Officer in-charge IT, GMC Srinagar for uploading on the official website.
05. Mr. Sajad Rashid Bhat (Jr. Assistant- Dealing Head) for information.
06. Concerned file.



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"Annexure A"

S No.	Name of the Officer/ Official	Designation.
01	Mrs. Neelofar Akther	I/c Assistant Store Keeper
02	Mr. Mohammad Rafiq Parray	I/c Senior Assistant
03	Mrs. Amina Aziz	Ex. Assistant Matron
04	Mr. Shakeel Ahmad Pandith	Sr. Pharmacist
05	Mr. Zahoor Ahmad rather	Sr. Pharmacist
06	Mr. Eddi Abbas	Lab. Technician
07	Mr. Nazir Ahmad Kutchay	X ray Technician
08	Mr. Javid Ahmad Khan	Sr. Theatre Assistant

Personnel officer
Associated Hospitals Srinagar



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"Annexure B"

Proforma for Seeking e-Vigilance Clearance

JK General Administrative Department O.M No. GAD-VIGOADM/9/2021-04 dated 23-06-2021

Controlling Officer/DDO :	Passport Size photograph of employee			
CPIS No. :				
Name :				
Parentage :				
Permanent Address :				
Present Address :				
Present Designation :				
Date of Birth :				
Date of Appointment :				
Mobile No :				
Email ID (if any) :				
Property Returns filed:				
Date of submission of Property returns (if any):.				
Posting Details from First Appointment				
Post held	Place of posting	From Date	To Date	Remarks

Seal and Signature of DDO/
Controlling Officer

NO:

Dated:-