

P/S

Office of the
Asstt. Commissioner
Customs, Dhubri Division

TRANSFER PROFORM (Option AGT for 2016-17)

1. (a) Name of the Officer (in Block Letter) : **SYED IMAM**
 (b) Designation : **INSPECTOR**
 (c) Date of Birth : **01.01.1991**
 (d) Date of initial appointment in the Dept.& grade : **01.04.2016 - INSPECTOR,**
 (e) Date of Appt. in the present Grade : **DHUBRI, ASSAM**
2. Name of Home Town & State:

30 OCT 2016

DHUBRI
RECEIVED

3. History of Postings since entry in service:

Sl. No.	Name of the Office with Station	Post Held	From (Date)	To (Date)
1	DHUBRI, CUSTOMS DIVISION	INSPECTOR	01.04.2016	18.09.16
2	Haldiyajay CPF	INSPECTOR	19.09.2016	till date
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

4. Options/ Preference for Station/ Commissionerate:

- (a)
- (b)
- (c)

5. If retention at the present station is requested, please give reasons for such request:

- (a) *Since I have joined at Haldiyajay a month ago.*
- (b)
- (c)

6. Any other request/ details which you would like to submit:

Syed Imam
 Signature
 Name : **SYED IMAM**

Verification

Certified that the particulars furnished above have duly been verified from office records and found correct.

[Signature]
 Head of Office / Controlling Officer
 Assistant Commissioner
 सहायक अयुक्त
 Customs Division, Dhubri.
 सीमा शुल्क मंडल, धुब्रि

Certified that the particulars furnished above have duly been verified from the office records and found correct.