

Name with initials :
Address:
.....
Date:.....

Through : (Head of Department / Institution)
.....
(Chairman, National Council for Elders)
.....
.....

Appeal made against the Transfer

01. Particulars of the Appellant :

- 1.1 Full Name :
- 1.2 Service : Class : Grade :
- 1.3 Post :
- 1.4 Station :
- 1.5 Department / Institution :
- 1.6 Ministry :

02. Decision / Order on which the appeal is based.

- 2.1 Describe the decision / order briefly :
.....
.....
.....
- 2.2 Who made the decision /order?
.....
- 2.3 The date on which the officer received the order :

24 Certified copies of letters containing the decision / order are attached as annexes shown below :

- Annex(1)
- Annex(2)

2.5 Any other relevant matters :
.....
.....
.....

03. Reasons for making an appeal against the decision / order :

- 3.1
- 3.2
- 3.3
- 3.4

3.5

3.6 Certified copies of written submissions to support the above reasons are attached as annexes shown below :

Annex(1)

Annex(2)

Annex(3)

04. Redress prayed for :-

(1)

.....

(2)

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(3)

.....

(4)

.....

.....

Signature :

Name :

Designation :

Date :

Copies :
Chairman,
National Council for Elders -
(This advance copy is kindly referred to you for necessary action).