Application for Annual Transfers -2026

National Secretariat for Elders

Elders Rights Promotion Officer

1.												
	I.	Full name of Officer:										
	II.	Gender:										
	III.	Permeant Private add	ress:									
	IV.	Identity Card Number	·									
2.	Present	t office of Officer and p	period o	of service the	ere on:							
3.	Date of	f birth of Officer:	Year		Mont	h			Date			
	Age of	Officer as at 31 st of De	ecember	2025	Year		ľ	Month			Date	
4.												
I. Date of first appointment of Officer:												
	II.	Current post and Grade :										
	III.	Date on which the Of	ficer qu	alified to th	at Grade	:						
5.												
	I.	Whether Officer is confirmed in the service : Yes / No										
	IV.	If confirmed, date on	which (Officer was	confirme	d in the	e servi	ce:				
6.	Service	e stations / divisions ar	nd time	periods from	m the dat	e of app	pointm	ent (if s	erved in	the Head	Office, in	dicate
	the Div	visions as well										
	Time	e period in which Office	er	Period o		(Years	:		Work	station		
		served			Months)							

Previous workstation	Served time period	Workstation to where	Time period for which						
		Officer was transferred on	Officer served						
		disciplinary grounds							
		1							
Name three workstations, to which you wish to, get the transfer, in the order of priority. Prevent from namin									
workstation only.									
I									
II									
III									
I. Civil status of Officer: Married / Unmarried									
II. Employer and workstation of spouse (should prove with documents)									
Government S	Government Sector Semi Government								
		Sector							
Private Sector		Other							
III If Officer has Children details in this record									
III. If Officer has Children, details in this regard									
Name of the Ch	ild Age of th	ne Grade in which the chile	d School of the child						
	Child	studies							

7. Mention if transfers have been received regarding disciplinary grounds

	IV. If Officer has old and sick p	parents, details in this regard (should prove with documents)						
	Age of mother/ father	If the parent suffers from any sickness, detail it.						
-								
L								
10. N	Mention the reasons for applying fo	r transfer in priority order						
1								
2								
2	2							
3								
1	·							
4								
5								
		and correct to the best of my knowledge and my personal file already has the						
_	_	Is which I have furnished and in addition to that I submit the necessar						
documen	ts along with this application							
Date:		Signature of Applicant						
Recomm	endation of the Head of the Depart	ment:						
Director,	National Secretariat for Elders,							
Officer o	on he released with / without a suit	able officer Application is recommended / not recommended						
Officer C	an oc released with / without a sun.	able officer Application is recommended / not recommended						
Date :		Signature of the Head of the Department						
		Official Stamp)						