APPLICATION FORM FOR OPTION TRANSER OF AWARD STAFF (To be submitted in duplicate)

The Chief Regional Manager, United Bank of India, Region Off (Opted Region	Design SPF N on) Branc Region	(Name): nation: No. : h/Office: n:	
Through: The Chief Manage	er/Senior Manager/Mana	ager, UBI,	Branch/Office.
Dear Sir,			
In terms of H.O Circular N dated 17.06.2010 and PD(I	DIR)14/0M-0290110 date	ed 03.09.2010, I seek	transfer to any of the
following Branches/Offices	situated in the State of	of	under the administrative
control of Chief Regional M	anager of	Region.	
1. Name of Branches 1 2 5 6 9 10	3 7	,	
2. Option Transfer sou	ght of following ground	s (Tick the appropriat	te box):
Co Co Or	mpassionate Medical mpassionate Spouse mpassionate Physically Challe dinary Option rplus Employee		
3. Option Transfer sou	ight for the Post of (Tie	ck the appropriate box	x):
	Special Assistant Head Cashier-II Single Window Operator Sub-ordinate Staff		

4.		Particulars of the I	Employee	: 4	*				
	a)	Name in Full:							
	b)	Designation:							
	c)	S. P. F.:							
	d)	Educational Qualific	eation:						
	e)	Date of Birth:							
	f)	Branch/Office of Po	sting:		<u> </u>				
	g)	Name of the State	in which	Branch/Offic	ce is situated:				
	h)	Name of the Region	n in which	the Branch	Office is situated:				
	i)	Category: Whether belongs to SC/ST/OBC/General/Physically Challenged:							
	j)	Present residential	address of	of the Emplo	yee:				
		(Please give full add	dress with	1					
		Phone No. /Mobile N	No.)						
					<u> </u>				
	k)	Permanent residentia	al address	of the Emplo	yee:				
		(Please give full add	dress with	n					
		Phone No./Mobile N	(o.)						
	1)	Date of appointment	in the Ba	nk as Probati	onary Clerk/Sub-staff:				
1	m)	Date of promotion t	o Clerical	Grade:					
1	n)	Date of actual joining	ng in the	Clerical Grad	le:				
	0)	Date of switch-over	to the po	st of sub-sta	ff:				
1	p)	Date of actual joining as Sub-staff:							
5.	Do	rticulars of Option T	rancfar						
٥.	<u>1 a</u>	ruculars of Option 1	ransici.						
		a) Please mention t			prayed for:branch/office on own option: Yes/No				
		b) whether previous	isiy transı	circu to any	oranen/ornee on own option. Tes/140				
Nun	ıbeı	r of transfer availed	as an A	ward Staff	during the service period (including both in				
		dinate Cadre and C							
Sl		Name of the	Posted	Period of	Mode of Transfer (whether Option/Surplus	_			
No.		Branch/Office	as	Work	Adj/Rotation or Administrative transfer				
						_			
						_			

6.	a) Whether drawing any S	pecial Pay:	*						
	b) Whether agreeable to forego such Special Pay if transfer if affected:								
7.	Particulars relative/relatives working in the Bank, if any:								
Sl No.	Name of the Relative/Relatives	Designation	Branch/Office of	Nature of					
	Relative/Relatives	-	Posting	Relationship					
 8. Declaration: a) Though I am a Relieving Staff/Sub-Staff, I have completed 6 (six) months service in the Bank in my present Cadre. b) I am not under any Order of Transfer/Posting to any Branch/Office. c) I have not applied for Option Transfer to any Branch/Office within the State or Inter- State. d) The information/particulars furnished above are correct and true. In case it is found that the declaration given by me is false, the Bank shall be at liberty to reject my option prayer and the transfer order if already effected, may be treated as cancelled and I may be transferred/posted back to the original Branch/Office. Apart from this, I shall be liable for disciplinary action in the event of detection of any false declarations made by me in my Option prayer. 									
				Yours faithfully,					
			(Signature	of the Employee)					
			(Name	of the Employee)					
			Contact No.:	·					