GOVERNMENT OF ANDHRA PRADESH
GENERAL ADMINISTRATION (SR) DEPARTMENT


Subject: A.P. Reorganisation Act 2014 – Submission of Option by State cadre employees indicating their preference to serve for either of the States of Andhra Pradesh or Telangana. Formats for preferential claim for allotment to a particular State on grounds like spouse being in service – Prescribed – Issued.

Ref: 1. Guidelines relating to Allocation of State Services Employees

In the Circular Memorandum second cited, detailed instructions were issued prescribing the procedure for filing options electronically and for submission of ink signed downloaded printed option form with relevant documents and certificates by all the allocable employees and the further action to be taken in the matter by the Heads of the Departments concerned.

2. In the ref 3rd cited, among other instructions, formats of declaration and Medical certificates were prescribed for the Widowed female employees, Physically Disabled employees with more than 60% disability and the employees or whose spouse or child is known to be facing serious medical hardship and claiming preferential allotment for submission along with the supporting documents and submit along with the printout of the down loaded filled option.

3. The grounds for preferential allotment to a particular State on the basis one’s Spouse being in State government or local bodies service are specified in paragraph 18 (k) & (l) of the Guidelines in relation to allocation of State services employees as detailed below.

k) Spouse of an All India Service (AIS) officer who belongs to a State cadre or is an employee of a State Government institution shall be allocated, where so desired by the spouse, to the State to which the AIS officer is allocated.

l) Spouses in State cadre in Government or in State Government institutions, local bodies and those who are deemed allocated as per the Act, shall as far as practicable, be allotted to the same State, after considering options made by them and their local candidature. Spouses who are local candidates of a State shall be allocated to that State. Spouses who belong to different States may be allocated after considering their options.

4. A State cadre employee whose spouse is an All India Service (AIS) officer, or another State cadre employee, or a local authority employee, or local cadre employee of government and claiming preferential allotment on that ground shall attach a declaration document as specified in annexure-I or annexure-II or annexure-III or annexure-IV respectively attached to this Memo with supporting documents specified therein and submit along with the printout of the down loaded filled option form to the Member-Secretary, Advisory Committee, G.A. (SR) Department, A.P. Secretariat through proper channel, i.e., through their respective Head of the Department of the Government within two weeks from the date of publication of notification calling for options as instructed in the Circular Memo second cited.
5. All the Departments of Secretariat and Heads of the Departments of Andhra Pradesh and Telangana State, are requested to bring these instructions to the notice of their employees.

L.PREMACHANDRA REDDY,
SECRETARY TO GOVERNMENT. (SR).

To
All the departments of Secretariat of Andhra Pradesh and Telangana State
All the Heads of the Departments of Andhra Pradesh and Telangana State
Copy to:
PS to Chairman, Advisory Committee
PS to Chief Secretary to Govt, A.P
PS to Chief Secretary to Govt, Telangana
PS to Secretary to Govt (SR), GAD, A.P
PS to Spl Secretary to Govt (SR), GAD, Telangana

//FORWARDED :: BY ORDER//

SECTION OFFICER
ANNEXURE-I

DECLARATION OF EMPLOYEE WHOSE SPOUSE IS AN ALL INDIA SERVICE
EMPLOYEE

I, Smt/ Sri. ------------------------------- w/o/ H/o Sri./Smt ------------------------------
------- a State cadre government employee working as -------------------------------
------- in the O/o -------------------------------- of -------------------------------
Department, am seeking preferential allotment to the State of Andhra Pradesh/
State of Telangana in terms of paragraph 18 (k) of the Guidelines relating to
Allocation of State Services Employees. I hereby declare that my husband / wife Sri/
Smt. ------------------------------- is an officer of the IAS/IPS/IFS cadre allotted
to the State of Andhra Pradesh / Telangana and that I am eligible to be considered
for preferential allotment to the State of my choice. I submit the Service certificate of
my spouse as proof of claim.

Signature: -------------------------------
Name of the Employee: -------------------------------
Place: -------------------------------
Date: -------------------------------

I certify that I have verified and found the above declaration to be correct/ incorrect. I
recommend / do not recommend favourable consideration of the preferential claim.

Signature of the Head of the Office: -------------------------------
(Along with stamp)
Name: -------------------------------
Designation: -------------------------------
Name of the Office: -------------------------------
Place: -------------------------------
Date: -------------------------------

//Attested//

[Signature]
SECTION OFFICER
ANNEXURE-II

DECLARATION OF EMPLOYEE WHOSE SPOUSE IS AN EMPLOYEE IN STATE CADRE IN GOVERNMENT

I, Smt/ Sri. --------------------------w/o/ H/o Sri./Smt --------------------------
------- a State cadre government employee, working as --------------------------
------- in the O/o -------------------------- of --------------------------
Department , am seeking preferential allotment to the State of Andhra Pradesh/ State of Telangana in terms of paragraph 18 (I) of the Guidelines relating to Allocation of State Services Employees. I hereby declare that my husband / wife Sri/ Smt.--------------------------
-------------------------- is a State Cadre Government Employee, now working as -------------------------- in the O/o -------------------------- of -------------------------- Department at -------------------------- that he/she is a local candidate in relation to the State of Andhra Pradesh / Telangana., that he / she is also seeking allotment to the State of Andhra Pradesh/Telangana and that I may be considered for preferential allotment to the State of Andhra Pradesh / Telangana.

I submit the local candidate certificate and Service certificate of my spouse as proof.

Signature:--------------------------
Name of the Employee: --------------------------
Place:--------------------------
Date:--------------------------

I certify that I have verified and found the above declaration to be correct/ incorrect. I recommend / do not recommend favourable consideration of the preferential claim.

Signature of the Head of the Office/ Department: --------------------------
(Along with stamp)

Name:--------------------------
Designation:--------------------------
Place:--------------------------
Date:--------------------------

//Attested//

SECTION OFFICER
ANNEXURE-III


DECLARATION OF EMPLOYEE WHOSE SPOUSE IS AN EMPLOYEE IN LOCAL BODY

I, Smt/Sri. -------------------------------------- w/o/ H/o Smt ---------------------
------------------ a State cadre government employee, working as -----------------------
------------------ in the O/o ------------------------------- of -------------------------

Department, am seeking preferential allotment to the State of State of Andhra Pradesh/State of Telangana in terms of paragraph 18 (I) of the Guidelines relating to Allocation of State Services Employees. I hereby declare that my husband / wife Smt. -------------------------- is a local authority employee of
____________________(specify the name of the authority) now working as__________________________ in the O/o __________ of
____________________ at _______________ and that I am eligible to be
considered for preferential allotment to the State of Andhra Pradesh/Telangana
choice. I submit the Service certificate of my spouse as proof of claim.

Signature...........................................

Name of the Employee: .........................

Place: ..............................

Date: ..............................

I certify that I have verified and found the above declaration to be correct/ incorrect. I recommend / do not recommend favourable consideration of the preferential claim.

Signature of the Head of the Local Authority

(Along with stamp)

Name of the Local Authority : __________________________
Name of the Head of the office __________________________
Place: ..............................
Date: ..............................

//Attested//

Signature of the District Head of the

Controlling department under which the

Local authority functions: .........................
(Along with stamp)

Name : ..............................
Designation: ..............................
Name of the Office: ..............................
Place: ..............................
Date: ..............................

//Attested//

SECTION OFFICER
ANNEXURE-IV

DECLARATION OF EMPLOYEE WHOSE SPOUSE IS A LOCAL CADRE EMPLOYEE WHO IS DEEMED ALLOTTED AS PER ACT

I, Smt/ Sri. .......................... w/o/ H/o Sri./Smt ..........................
--------- a State government employee, working as _____________________________
in the O/o ___________________________ of ___________________________

Department, am seeking preferential allotment to the State of Telangana / State of Andhra Pradesh in terms of paragraph 18 (I) of the Guidelines relating to Allocation of State Services Employees. I hereby declare that my husband / wife Sri/ Smt.------------------ is a local cadre employee of the Department of ___________________________
and deemed allotted to the State of Andhra Pradesh / Telangana, and now working as_________________________ in the O/o ___________________________ Department at ____________,
that

he / she is a local candidate in relation to the State of Andhra Pradesh / Telangana.

and that I am eligible to be considered for preferential allotment to the State of Andhra Pradesh / Telangana. I submit the Service certificate of my spouse as proof of claim.

Signature........................................

Place: ........................................

Date: ........................................

I certify that I have verified and found the above declaration to be correct/ incorrect.

I recommend / do not recommend favourable consideration of the preferential claim.

Signature of the District
Head of the Office: ..........................
(Along with stamp)

Name: ........................................

Designation: .............................

Name of the Office: ..................

Place: .............................

Date: ..........................

//Attested//

SECTION OFFICER