



GOVERNMENT OF ODISHA
HEALTH & FAMILY WELFARE DEPARTMENT

OFFICE MEMORANDUM

No. 1104 /H.,
HFW-IT-EGOVNC-0001-2025

Date 12-01-2026

Sub: Submission of online transfer applications through Transfer Portal.

It has been decided to develop and operationalize a designated Transfer Portal under the e-Governance initiative of the Health & Family Welfare Department with a view to ensure transparency, uniformity and administrative efficiency in transfer-related matters. In this context it is hereby informed that all applications for transfer of officers and employees under the Health & Family Welfare Department shall be submitted only through the designated Transfer Portal.

2. Henceforth, no manual, physical or offline transfer requests or representations shall be entertained by Health & FW Deptt. except in the case of administrative exigency.
3. Updation of HRMS details is mandatory for all officers and employees intending to apply for transfer. Drawing & Disbursing Officers (DDOs) under the Head of office shall ensure that the HRMS records of the concerned employees are complete, accurate and duly updated prior to submission of transfer applications.
4. Transfer applications submitted without updation of HRMS details are liable to be rejected and shall not be considered for processing.
5. All applicants shall log in to the Transfer Portal using their respective HRMS ID for submission of transfer applications.
6. The Transfer Portal shall remain open for submission of applications from **15th January to 14th February**. All eligible officers and employees seeking transfer are required to apply within the stipulated period, failing which their applications shall not be entertained.
7. In cases of mutual transfer, the HRMS ID of the other employee with whom the mutual transfer is proposed must be clearly mentioned in the application, failing which such applications shall not be considered.
8. Inter-district transfer concerning Group C & D employees must be accompanied by the duly filled in format and undertaking as prescribed in GA & PG Deptt. circular and Health & FW Deptt. circular.
9. The Centre for Modernizing Government Initiative (CMGI) shall issue a detailed advisory along with a flowchart explaining the step-by-step procedure for submission of transfer applications through the Transfer Portal. The said advisory

and flowchart shall form an integral part of this Office Memorandum and shall be followed scrupulously by all concerned.

10. A district-wise list of CMGI District Coordinators is enclosed for facilitation, handholding and technical support during the application process.

11. All CDM & PHOs, Deans, Principals, Superintendents and Heads of Offices under the Health & Family Welfare Department are directed to circulate this Office Memorandum, along with the CMGI advisory and flowchart, among all officers and staff under their administrative control and ensure strict compliance of the instructions contained herein.

This Office Memorandum shall come into force with immediate effect.

✓ 12/1/26
Commissioner-cum-Secretary to Govt.

Memo No. 1105 /H., Dated 12-01-2026

Copy submitted to PS to Hon'ble Minister, Health & FW for kind information of Hon'ble Minister Health & FW.

✓ 12/1/26
Deputy Secretary to Government

Memo No. 1106 /H., Dated 12-01-2026

Copy submitted to Senior PS to Commissioner-Cum-Secretary for kind information of Commissioner-Cum-Secretary.

✓ 12/1/26
Deputy Secretary to Government

Memo No. 1107 /H., Dated 12-01-2026

Copy to all Collectors & DMs for information and necessary action.

✓ 12/1/26
Deputy Secretary to Government

Memo No. 1108 /H., Dated 12-01-2026

Copy submitted to All CDM & PHOs / All Deans of Medical Colleges / All Superintendents of Medical Colleges / All Principals of Nursing & Paramedical Institutions / All Heads of Departments under Health & Family Welfare Department / All CDM & PHOs for information and necessary action.

✓ 12/1/26
Deputy Secretary to Government

Memo No. 1109 /H., Dated 12-01-2026

Copy submitted to all Sections of Health & FW Deptt. for information and necessary action.

✓ 12/1/26
Deputy Secretary to Government

Memo No. 110 /H., Dated 12-01-2026

Copy submitted to Addl. Chief Secretary to Govt, GA & PG Deptt. for information and necessary action.

~~12/1/26~~

Deputy Secretary to Government

Memo No. 111 /H., Dated 12-01-2026

Copy submitted to ED, CMGI for information and necessary action.

~~12/1/26~~

Deputy Secretary to Government

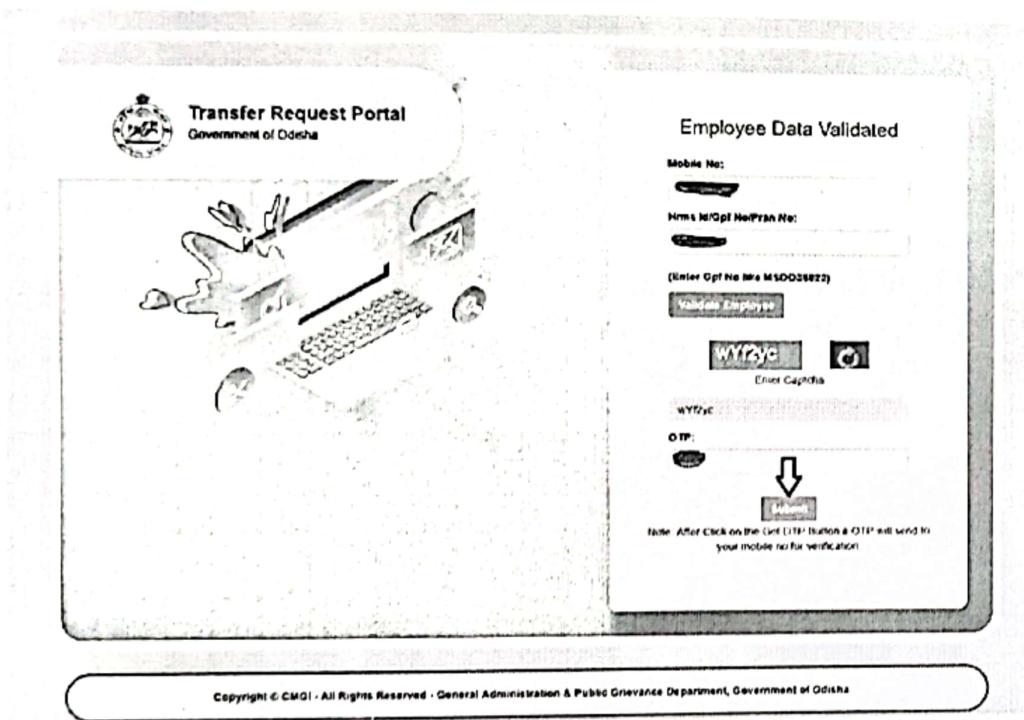
Transfer Request Portal

Url: <https://transfer.hrmsodisha.gov.in/>



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Login Page



- **Employee Login Process**
- Employees can log in using:
 - Registered **Mobile Number** in HRMS
 - Any one of the following:
 - HRMS ID
 - GPF Number
 - PRAN Number
- If the employee is registered in HRMS, the employee details will be displayed as "Validated" on the screen.
- Otherwise, the system will display the message: "Employee Cadre / Mobile No / HRMS ID / GPF No / PRAN No Mismatched".

Transfer Application Entry page

Transfer Request Entry Form

Employee Details		
Employee Name:	_____	
Employee Status:	ON DUTY	
Home Id:	81258451	
Gal/Plan No.:	110120144670	
Date of Birth:	24-MAR-1951	
Category:	GENERAL	
Current Cadre:	ODISHA MEDICAL AND HEALTH SERVICE	
Current Post:	L.T.R.M.O	
Current Office:	CHIEF DISTRICT MEDICAL OFFICER, DISTRICT MEDICAL, JAGATSINGHPUR	
Mobile No.:	_____	
Transfer Details		
<input checked="" type="checkbox"/> Interested For Transfer		
Transfer Options Details		
Option1	District: Boudh	Office: ADDITIONAL DISTRICT PUBLIC HEALTH OFFICER
Option2	District: Sealdah	Office: Sealdah
Option3	District: Sealdah	Office: Select
Transfer Ground		
Selected Transfer Ground:	Working Spouse	
Duty Period in Current Station:	Year: 3 Month: 6	
(Excluding PG / Unauthorized Absence / Extraordinary Leave / Deputation)		
Description Of The Grounds For Transfer:	Working in different location	
Attachment(s) If Any?	Browser: No file selected. (Only PDF file size maximum 5 MB.)	
Declaration		
<input checked="" type="checkbox"/> I, hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform any changes therein, immediately. In case any of the above information is found to be false, untrue, misleading, misrepresenting or Suppression, I am aware that I may be held liable for it. I hereby authorize sharing of the information furnished on this form with the HEALTH AND FAMILY WELFARE Department.		
Disclaimer		
<input checked="" type="checkbox"/> I understand that, merely applying for transfer does not give any right in favour of the applicant for the transfer. I also understand that transfer of the applicant may or may not be considered, keeping in view various factors.		
<input type="button" value="Save Application"/> <input type="button" value="Cancel"/>		

- On the entry page, the employee can update their category details and select transfer locations for up to three different districts (at least one district and one office are mandatory).
- The employee must then select the transfer ground, reason for transfer, and duty period. If required, supporting documents can be uploaded in PDF format.
- After selecting the declaration and accepting the disclaimer, the employee can submit the application.

Acknowledgement Page

Your application has submitted successfully



Edit/Modify Application Page

TRANSFER REQUEST APPLICATIONS

Reference No : 1234567890

EMPLOYEE DETAILS

Employee Name:	[REDACTED]
Employee Grade:	Supervisor
Category:	General
Branch:	Head Office
Mobile No.:	[REDACTED]

EMPLOYEE CURRENT CAREER PERFORMANCE

Assessment Date:	01-JAN-2023
Assessment Period:	12-Month
Assessment Office:	Head Office - Mumbai, Maharashtra, India

EMPLOYEE PAST RECORDS

DISCIPLINARY RECORD	OFFICE RECORD
Open 1	DISCIPLINARY RECORD - 1234567890
Open 2	
Open 3	

EMPLOYEE RECORDS

Booking System	
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EMPLOYEE WORKING LOCATION

Specify working in different location	
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APPLICATION DETAILS

Submitted on 10-Jan-2024 at 10:00:00

DISCLAIMER

I, [REDACTED] apply for the transfer request on the basis of my own judgment. I am fully aware of the responsibilities and obligations associated with the new position. I have read and understood the terms and conditions of the application. I am fully aware that I have to undergo a mandatory training of the department before I can start work in the department.

DECLARATION

I declare that I am fully aware of the responsibilities and obligations associated with the new position. I have read and understood the terms and conditions of the application. I am fully aware that I have to undergo a mandatory training of the department before I can start work in the department.

- If the employee has already submitted the application, they can modify it by clicking on the “Modify” option.
- The same entry page will be enabled for making the necessary modifications.

Delete /Withdraw Application

Reference No: 139000548

Personal Details

First Name: [REDACTED]
 Surname: [REDACTED]
 Date of Birth: 01/01/1980
 Gender: Male
 Home Tel: [REDACTED]
 Work Tel: [REDACTED]

Employment Details

Employer: [REDACTED] LTD
 Position: [REDACTED]
 Experience: [REDACTED] years
 Current Address: [REDACTED]

Address Details

Address: 123 Main Street, London, UK
 Type: Residential
 Status: Occupied
 Do you want to withdraw your Application? Yes No

Banking Details

Bank Name: [REDACTED]
 Branch: [REDACTED]

Comments

Leave empty if different location

Disclaimer

I, [REDACTED], declare that the information provided in this application is true and accurate to the best of my knowledge and belief. I understand that any false statement, omission or forged document may result in the cancellation of my application. I also understand that I am liable for any damage or loss caused to the bank or to any other party as a result of my application. I have read and understood the terms and conditions of the application form and the terms and conditions of the agreement.

Declaration

I declare that I am applying for credit and that you are acting on my behalf. I declare that the information contained in this application is true and accurate to the best of my knowledge and belief. I understand that any false statement, omission or forged document may result in the cancellation of my application.

In case of Withdrawl

- Employees can withdraw their application by selecting the “Withdraw” option.
- Withdrawn applications will not be considered for transfer.

In case of Deletion

- If the employee's cadre has changed and they wish to submit a new transfer request, they can delete the existing application and submit a fresh application.

CMGI District wise co-ordinators' details

District	Coordinator's Name	Contact Number
Balasore	Apurba Nanda Ray Mohapatra	9437545598
Bhadrak	Khitish Chandra Jugadharma	9438317527
Mayurbhanj	BHAGIRATHI BEHERA	8599820645
Cuttack	Sneha Ranjan Sahoo	9438731133
Jajpur	Sudhansu Sekhar Das	9438110661
Jagatsinghpur	Debasis Das	9437119925
Kendrapara	Jeetendra Kumar Sahoo	9861447434
Puri	Samapika Priyadarsini	9937445385
Nayagarh	Santosh Kumar Sarangi	9040244677
Khurda	Debasish Dash	86372060171
Ganjam	Gupteswar Rath	9938567960
Gajapati	Prasanta Kumar Sahu	9132128896
Phulbani	Diptikanta Nayak	9437356472
Boudh	Soumya Ranjan Sahoo	9861728634
Kalahandi	Partha Sarathi Chand	9937694509
Nuapada	Rajendra Sahu	9861228458
Rayagada	Narendra Kumar Sasmal	9437643680
Nabarangpur	Akshaya Kumar Pal	9937590928
Malkangiri	Ramakanta Dash	9437840825
Angul	Chitta Ranjan Sahoo	9861884620
Baragarh	Srikanta Tripathy	9861296486
Bolangir	Subhransu Sekhar Sarangi	9439276600
Deogarh	Banalata Sahu	9438626106

District	Coordinator's Name	Contact Number
Jharsuguda	Satyajit Sahoo	9040410424
Keonjhar	Smruti Rekha Sahoo	9778192147
Sambalpur	Suprava Ojha	9439488590
Sonepur	Ramaballav Panigrahi	9439275459
Sundargarh	Minati Patel	9438866673
Dhenkanal	Rita Beura	9861166053
Koraput	Sachidananda Samantaray	9438189740