

User Manual

Medical College Transfer Management System

URL: https://mtms.assam.gov.in

Developed for

Medical Education & Research Department (MERD)

Directorate of Medical Education

Government of Assam

Designed by



National Informatics Centre

Assam State Centre, Guwahati

Department of Information Technology Ministry of Electronics & Information Technology (MeitY)

Government of India

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ABOUT THE DOCUMENT

Services of Health Care Providers in Medical Colleges of the State are essential for delivering the quality patient care to the people of the State. A large portion of Health Care Providers in Medical Colleges in Assam includes Nursing Staff, Paramedics, Technicians and other Grade-III & Grade-IV supporting Staff. Considering the increasing footfall of patients in Medical Colleges of the State management of quality services of these staff are becoming essential.

Health Care Providers in Medical Colleges of the State apply for transfer from their present place of posting from time to time on various grounds. Due to off-line process of transfer application and its large quantity of numbers, the management of such transfer processes consumes time and it also creates difficulties for the applicants to trace their applications. To streamline such cumbersome process the Medical Education & Research Department under visionary guidance of the Hon'ble Chief Minister, Assam has developed the Medical College Transfer Management System Portal (MTMS) to address the transfer issues of Medical Staff promptly.

Medical College Transfer Management System will efficiently streamline the transfer requests of medical staff posted in different Government Medical College & Hospitals of Assam. The medical staff can apply for transfer by submitting their application online through the portal https://mtms.assam.gov.in.

Abbreviations

| NIC | . National Informatics Centre |
|-------|--|
| MeiTY | . Ministry of Electronics and Information Technology |
| MCH | . Medical College and Hospital |
| DME | . Directorate Medical Education |
| SA | . State Administrator |
| MTMS | Medical College Transfer Management System |
| MERD | Medical Education and Research Department |
| | |

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1. Introduction

Medical College Transfer Management System will efficiently streamline the transfer requests of medical staff posted in different Government Medical College & Hospitals of Assam.

1.1. Intended Users

This user manual has been prepared for the users of Medical College Transfer Management System software. It has been assumed that the user has basic working knowledge of computer as well as internet browsing experience.

1.2. Purpose

The purpose of this document is to provide an interface between the users and the application software. It will help users to understand various features of the application and will enable them to operate the software. The objective of the system is to provide an online system for management of Transfer process of Medical Staff by the Medical Education and Research Department (MERD), Directorate of Medical Education, Government of Assam.

2. System Requirements to run this Application software

The system will run on any client machine equipped with internet connectivity with the help of any of the JavaScript enabled browser installed in the system (Google Chrome or Microsoft Edge is preferable).

3. Product Features

The important features of management processes are as under:

- It is an integrated application system, based on web technology which primarily aims at management of transfer applications by the MCH Admin, DME from anywhere within any time period. This will lead to the speedy and error-free management of transfer process.
- It facilitates easy and quick registration and transfer apply, ensuring efficient management. Also, the status of application can be tracked in real-time, reflecting their current status and facilitating prompt decision-making.
- Provides a mechanism to monitor the current and real-time functionality status of applications at a glance. It gives a clear picture on a daily basis, enabling necessary actions for smooth service provision in medical institutions.
- Automatic online data transmission between different levels of users is facilitated by the proposed system. Users are granted access based on their roles, ensuring appropriate data security and privacy.
- The system includes features such as, searching, filtering and pagination, enabling users to find specific details based on relevant criteria and to navigate through large applications lists efficiently.
- The system manages unilateral and mutual applications separately, enabling focused management based on categorization with viewing and printing reports, facilitating documentation and record-keeping.

4. Online Transfer Apply Module and Operating Instructions (By MCH Staff)

These pages guide the MCH Staff for online transfer process.

4.1. Website landing Page

In order to access the system from an internet browser, open your internet browser and type: https://mtms.assam.gov.in, in the address bar and press enter. The following web page will open:



Services of Health Care Providers in Medical Colleges of the State are essential for delivering the quality national care to the neonle of the State A large portion of Health Care Providers in

This is the general interface of the system. The available links on this page are:

- ✤ About Us
- ✤ Register
- Login
- FAQ
- ✤ Help
- Contact Us
- ✤ Website policies
- Terms and Conditions/Disclaimer
- ✤ Sitemap

4.2. Registration & Login

Before starting the registration process, please ensure that the Medical Staff have the following for registration:

- > A valid mobile number.
- ➢ A valid Email Id.

Please keep in mind that the basic information that has entered at the time of registration cannot be edited.

4.2.1. Registration

To register, click on the on the "Register" menu item at the top navigation bar as shown in the screen below:



A modal will then appear. Fill out the form with the necessary information required (marked by *) and click on the "Send OTP to Mobile number" button as shown below:

| অ | দম চৰকাৰ GOVERNMENT OF ASSAM | | | | SKIP TO MAIN O | DNTENT Q A 🍟 🗚 |
|-------|---|-----------------------|------------------------------|-----------|----------------|-------------------------------|
| | Medical College T Medical Education and Re Directorate of Medical Edu | Transfer Management | : Svstem (MTMS) | | × | स्वस्य पारत पारत जो यो योर |
| f L | ogin Register Help + (| Salutation First Name | Middle Name | Last Name | | |
| | | - | | | | |
| | N | Mobile Number | Email Address | | | |
| | 1 | Enter Mobile Number | Enter Email Addres | SS | | |
| < | Ma | Create Password | Send OTP to Mobile number | | 1S) |) |
| | | Enter Password | Enter Confirm Pass | sword | 0 | |
| | C | i P | assword Generation Guideline | | Э | |
| | | Enter Captcha | | | | |
| | | Enter Captcha | 25 + 5 = | Refresh 🞜 | | |
| | Latest Updates 0 appli | | | | | |
| Welco | me to the Medical Co | La La | Cancel Register | | | |

| Then enter the OTP received on the mobile no | . and click on | "Submit OTP" | button |
|--|----------------|--------------|--------|
| as shown below: | | | |
| | | | |

| | st Name* | Middle Name | Last Name | |
|------------------|----------------------------------|--|-----------|---|
| Mr. Jo | ОНИ | | DOE | |
| Mobile Number* | | Email Address* | | |
| 100000000 | | test@gmail.com | | |
| Create Bassword* | Enter OTP You can re-send OTP | Submit OTP | nds | |
| Enter Password | 0 | Enter Confirm Pas | ssword | 0 |
| • | i Password Ger | eration Guideline | | |
| Enter Captcha* | | | | |
| | | 23 + 7 = | Refresh 😂 | |
| Enter Captcha | | the second s | | |

Once the OTP verified successfully, click on the "Register" button to complete the registration process. Once the registration is completed, user will receive an SMS notification in their registered mobile number.

| Salacation First Name | Middle Name | Last Name |
|-----------------------|--------------------------------|-----------|
| Mr. JOHN | | DOE |
| Mobile Number* | Email Address* | |
| 100000000 | test@gmail.com | |
| Create Password* | Confirm Password* | ····· |
| | T rassword deneration duidenne | |
| Enter Captcha* | | |
| Enter Captcha* | 25 + 4 = | Refresh 🞜 |

4.2.2. Login

To login into the system Click on the "Login" menu item in the top navigation bar as shown below:



Then the Login modal will appear. At this point, the medical staff has to enter their registered Mobile number and Password. Then click on "Request OTP" button.

| ut Us Login Re | gister FAQ Help - | MTMS Login | × | | |
|----------------|---------------------------|---------------------------------|-----|--------|----|
| | 10.00 | Phone number* | | | |
| | Medio | Enter Phone Number | 15 | sfer | |
| | | Password* | | | |
| \sim | lanage | Enter Password | • N | AIMS) | |
| | 9 | Enter Captcha* | | | |
| | | Enter Captcha | | | |
| | Online Ap | 14 + 3= Refresh 3 | se | of Use | |
| | | | | | |
| atest Updates | 2 applications for mutual | Request OTP | | | (F |
| | | Create Account Reset Password | | | |

Once received, enter the OTP and check the "I Agree to terms of use" to provide consent to the Terms of Use. Then click on "Login" button as shown below:

| | অসম চৰকাৰ GOVERNMENT OF ASSAM | | | SKIP TO MAIN CONTENT | ٩ | А | 2 |
|--|---|---|----------|----------------------|--------|-----------|---|
| Later and the second se | Medical College Transfer Ma Medical Education and Research Departmer | MTMS Login | | | Real | | |
| 2 2 | area | Phone number* | | | Q8 844 | - telefor | |
| | About Us Login Register FAQ Help + | 100000000 | | | | | |
| | Medi | Password* | nsfe | r | | | |
| | Manage | Enter OTP* Enter OTP | | VS) | | | |
| | Online Ap | Enter Captcha* Enter Captcha 27 + 3 = Refresh C | ase of U | se | | | |
| | | I Agree to terms of use | | | | | |
| | Latest Updates 2 applications for mutual | rou can re-send Ore in: Uminutes Siseconds | | | | | 2 |
| l | Welcome to the Medical College Trans | Login Create Account Reset Password | | | | | |

4.3. Dashboard

After successful login, MCH Staff will get the dashboard as shown below:



4.4. Complete Profile

Profile completion will be done by the MCH staff themselves. Profile can be edited multiple times even after they have been saved. There are 3 sections in profile: Personal Details, Address Details and Service Details.

Note: Only after the completion of profile, MCH staff can apply for transfer.

4.4.1. Personal Details

First step is to save the personal details, click on the "Personal" tab under the "Profile" section of the sidebar or else click the "Personal Details" as shown below:



Here, first thing is to OTP verify your Email by clicking the "Send OTP to Email address" button. Please do not refresh the page.

| Personal Details | 5 | 💄 About Me 🛛 🔎 Chang | e Password 🥒 Edit Profile 🛛 🕞 Logout |
|------------------------------------|--------------------------|------------------------|--------------------------------------|
| 1 Personal Details | | 2 address Details | 3 Service Details |
| All the mandatory fields are marke | d with an asterisk (*) | | |
| Salutation * | First Name * | Middle Name | Last Name |
| Mr. | ARTHUR | FREYA YORK | JEFFERSON |
| Mobile * | Email * | | |
| 300000011 | lotolu@mailinator.com | Send OTP to Email addr | ess |
| | Email Not Veri | led | |
| Gender * | Date of Birth * | Caste * | Religion * |
| select ~ | dd-mm-yyyy | select | ~select |

Then, enter the OTP received in the email and click on "Submit OTP" button.

| ■ Personal Details | | 💄 About Me 🛛 🔎 Change Passwo | rd 🖋 Edit Profile 🕻 → Logout |
|---------------------------------------|------------------------|--|------------------------------|
| 1 Personal Details | Addres | 2 Is Details | 3 Service Details |
| All the mandatory fields are marked v | vith an asterisk (*) | | |
| Salutation * | First Name * | Middle Name | Last Name |
| Mr. | ARTHUR | FREYA YORK | JEFFERSON |
| Mobile * | Email * | | \frown |
| 300000011 | lotolu@mailinator.com | Enter OTP | Submit OTP |
| | Email Not Verified | You can re-send OTP in: 9minutes 45sed | conds |
| Gender * | Date of Birth * | Caste * | Religion * |
| select ~ | dd-mm-yyyy | select ~ | select ~ |

Once the Email is verified, you can now proceed to fill out the required personal details in the corresponding fields. Then click on the "Save data" button.

| Personal Deta | its. | Ac | dress Details | | Service Details |
|---------------------------------------|-----------------------|---|------------------------|---|----------------------|
| All the mandatory fields are marked w | ith an asterisk (*) | | | | |
| Salutation * | | First Name * | Middle Name | | Last Name |
| Ms. | | PRIYA | SUBHALAKHMI | | HAZARIKA |
| Mobile * | | Email * | | | |
| 8134075836 | | priyehazarika07@gmail.com | | | |
| | | Email Verific | nd | | |
| Sender * | | Date of Birth * | Caste * | | Religion * |
| Female | ~ | 10-05-1999 | GEN | ~ | Hinduism |
| Marital Status * | | Profile Photo (Optional) | | | |
| Single | ~ | Choose File No file chosen | | | |
| | | Allowed prg/jpg/peg, max, file size 2016b. Photo: Uploaded, woman-g76a418931_640.jpg | | | |
| Mother's Name * | | | | | |
| Salutation * | | First Name * | Middle Name (Optional) | | Last Name (Optional) |
| Mrs. | ~ | Sima | | | Hazarika |
| father's/Spouse Name * | | | | | |
| Salutation * | | First Name * | Middle Name (Optional) | | Last Name (Optional) |
| Mr | ~ | Probhat | Chandra | | Hazarika |

4.4.2. Address Details

Next step is to provide the address details. Click on the "Address Details" tab as shown in the screen below:

| | Medical College Transfer Medical Education and Researc Directorate of Medical Education | Management System (MTMS) Department , Government of Assam | | स्वयम् भारत एव कन स्वछत्रा से बोर |
|--|---|---|--|---|
| Ms. Priya Subhalakhmi Hazarika User Role: MCH Staff User ID: priya 4223 Mobile: 8134075836 | Home Users can sub | LAbor | at Me Change Password nonce their profiles, including p | ✓ Edit Profile (→ Logout ersonal details, service details, and |
| Profile - Apply Online - Requests - | Dete | Is Details | Details | |
| Applications - | | APPLY FOR UNILATERTAL TRANSFER | APPLY FOR RUTUAL TRANSFER | |

Fill up the required fields and once sure that the information entered are correct, click on the "Save data" and go to the next section.

| Personal D | etalis | | 2 Address Details | 3 Service Details |
|---------------------------------|--------------------------|----------------------|----------------------|----------------------|
| All the mandatory fields are m | arked with an asterisk (| •) | | |
| Present Address * District * | L | ocality * | Post Office * | Village/Town * |
| JORHAT | ~ | Natus voluptates ver | Qui laboriosam veri | Est incididunt nisi |
| Police Station * | F | In Code * | | |
| JORHAT | ~ | 785015 | | |
| Permanent address is the s | ame as present address | | | |
| Permanent Address * | | | | |
| District * | L | ocality * | Post Office * | Village/Town * |
| JORHAT | ~] | Natus voluptates ver | Qui laboriosam veri | Est incididunt nisi |
| Police Station * | F | 'in Code * | | |
| IOPHAT | | 785015 | | |

4.4.3. Service Details

Next step is to save the service details. Click on the "Service Details" tab or in the sidebar as shown:



The form shown below will appear, after entering the required data, click on the "Save data" button.

Note: please make sure to provide the Current Posting Details correctly.

| Service Details | | | | 1 Ab | out Me 🎾 Change Password 🖉 Edit Profile 🔂 Lo |
|---|---|-------|---|---------------|--|
| 1 Personal Details | | Addr | 2 ese Datalle | | 3 Bervice Details |
| If the mandatory fields are marked with an asterisk (*) | | | | | |
| ob Grade * | | | Staff Category * | | |
| Grade 3 Grade 4 | | | Nursing O Technical O Non Technical | | |
| ppointment Letter No. (Optional) | Appointment Letter Date (Optional) | | Date of Retirement (Optional) | | |
| DST.30/2022/221 | 01-07-2022 | • | 01-01-2059 | | |
| etails of initial posting in Govt. service (Regular) * | | | | | |
| ate of Joining * | Name of Health Facility * | | Designation * | | First Joining Letter (Optional) |
| 01-07-2022 | Gauhati Medical College & Hospital, Guwah | ati 🗸 | Head Nurse (Critical Care) [GP: 9100] | ~ | Choose File No file chosen |
| | | | | | Allowed only PDF, max. file size 200kb. |
| Department (Ward, ICU, etc., please specify) (Optional) | | | | | |
| ICU | | | | | |
| | | | | | |
| current posting details are the same as those of the in | itial posting in govt. service. | | | | |
| hate of joining * | Name of Health Eacility * | | Designation * | | Current Joining Letter (Ontional) |
| 01-07-2022 | Gaubati Marical Collana & Hosnital Guwah | ati 🗸 | Head Nurse (Critical Care) (CP: 9100) | ~ | Chapter File No file chapter |
| or or none | | | riene (anna (annan anna)[ar i a raaf | | Allowed only PDP, max, file size 200kb. |
| | | | | | Document Uploaded, file-sample_150kB.pdf |
| | | | | | |
| Department (Ward, ICU, etc., please specify) (Optional) | | | Assam Nurses' Midwives' & Health Visitor's Counci | I Registratio | n No. * |

4.5. Apply for Unilateral Transfer

To Apply for Unilateral Transfer, go to "Apply Online" section of the sidebar, select the "Unilateral Transfer" or click on the tab shown below:

| | Medical College Transfer Manage Medical Education and Research Departs Directorate of Medical Education, Govern | ment System (MTMS) nent ment of Assam एक कल सब्दा भी चोर |
|---|---|---|
| Ms. Priya Subhalakhmi Hazarika | E Home | About Me 🎤 Change Password 🖋 Edit Profile 🕞 Logout |
| User Role: MCH Staff | Users can submit their tr | nsfer applications (unilateral or mutual) once their profiles, including personal details, service details, and |
| User ID: priya_4323 Mobile: 8134075836 | _ 1 _ | _ 2 2 3 _ |
| ATMS Home | | |
| Profile - | Personal Details | → Address → Service Details → Details |
| Apply Online 👻 | | |
| Requests | | |
| Applications - | | 2 🔗 |
| | | PPLY FOR APPLY FOR MUTUAL TRANSFER |

4.5.1. Transfer Form Filling

Fill up the required fields in Application form for Unilateral Transfer. The application can be saved as draft.

Note: Please provide the preferences for desired place of transfer carefully.

| | Medical College Transfer Management System Medical Education and Research Department Directorate of Medical Education, Government of Assam | n (MTMS) | | (पावड) भारत इ करम स्वयुवा की मोर |
|---|--|--------------------------------|---|-------------------------------------|
| Ms. Priya Subhalakhmi Hazarika | Application Form for Unilateral Transfer | | 🛓 About Me 🏼 🤌 Change Password 👘 Edit Profi | le 🗘 Logout |
| User Role: MCH Staff User ID: prtys_4323 Mobile: 8134075836 | Preference for desired place of transfer 1st Preference * | 2nd Preference (Optional) | 3rd Preference (Optional) | |
| A MTMS Home | select | select | ~select | ~ |
| Profile 🔹 | Reason for Transfer | Reason for Applying Transfer * | | |
| Apply Online 👻 | -select- v | | | |
| | | | | |
| Mutual Transfer | | Maximum allowed charcters: 200 | Characters | remaining : 200 |
| | Supporting Documents (if applicable) (Optional) | | | |
| requests • | Choose File No file chosen | | | |
| Applications - | Accepted documents: Medical Certificate or any other supporting documents Accepted tormat: POP. Maximum the size: 500 KB. | | | |
| | Is Transferred Earlier? * | | | |
| | ⊖Yes ⊖No | | | |
| | | | | |
| | Save Details as Draft Submit Application | | | |

4.5.2. Transfer History

After entering the transfer details in the corresponding fields, if the medical staff transferred earlier, choose the "yes" in the option given. Then, enter the details of previous posting as shown:

| Jason for Transfer* | Reason for Apply | ying Transfer * | | | |
|--|----------------------------|--|-------------|------------------------------|-------------|
| Medical Ground (Dependent) | ✓ For Reason R | leason | | | |
| | | | | | |
| | Maximum allowe | d charcters: 200 | | Characters rer | naining : 1 |
| upporting Documents (if applicable) (Optional) | | | | | |
| Choose File No file chosen | | | | | |
| cepted documents: Medical Certificate or any other supporting | documents | | | | |
| cepted format: PDF. Maximum file size: 500 KB. | | | | | |
| | | | | | |
| Yes O No | | | | | |
| If Yes, Give Details of Previous Posting * | District * | Date of Joining * | Transfer Ca | terrory * | |
| If Yes, Give Details of Previous Posting * Place of posting * | District * | Date of Joining * | Transfer Ca | tegory * | |
| If Yes, Give Details of Previous Posting * Place of posting * GMCH | District * | Date of Joining * ∨ 06-07-2020 | Transfer Ca | tegory * Interior Remove | |
| If Yes, Give Details of Previous Posting * Place of posting * GMCH | District * KAMRUP METRO | Date of Joining * | Transfer Ca | tegory * Inction V Remove | |
| If Yes, Give Details of Previous Posting * Place of posting * GMCH | District * | Date of Joining * | Transfer Ca | tegory * Notion V Remove | |

4.5.3. Preview and Final Submit

Once clicked on "Submit Application", a preview of the transfer application will appear on screen. Verify the correctness then check the undertaking and click on "Final Submit" to submit the transfer application as shown:

| anakiinii | | Preview Application | on Data | | issword 🥒 Edit Profile 🕞 Logout |
|-----------|--|--|---|---|---------------------------------|
| H Staff | Council Registration No. | | | | ^ |
| 6686 | Details of initial posting in Govt. service (Reg | ular) | | | |
| | Date of Joining: | 28/08/1992 | Name of Health Facility: | Nalbari Medical College & Hospital, Nalbari | |
| | Designation: | Deputy Nursing Superintendent (Deputy Matron) | Department: | Natus voluptates exe | ege & Hospital, Tinsukia |
| | First Joining Letter: | N/A | | | |
| ÷ | Details of current posting | | | | |
| | Date of Joining: | 26/02/1987 | Name of Health Facility: | Gauhati Medical College & Hospital, Guwahati | |
| | Designation: | Public Health Nurse | Department: | Hic velit aliquip ad | |
| | Current Joining Letter: | N/A | | | Characters remaining : 1 |
| | | Transfer Applicatio | n | | |
| | Preference for desired place of transfer: | 1st Preference: Jorhat Medical Co 2nd Preference: Assam Medical C 3rd Preference: Tinsukia Medical (| llege & Hospital, Jorha ollege & Hospital, Dibri College & Hospital, Tins | t Jgarh sukia | |
| | Transfer type: | Medical Ground (Dependent) | | | |
| | Reason for seeking transfer: | For Reason Reason | | | |
| | Has the applicant been transferred before? | Yes | | | |
| | Details of previous postings: | 1. Joined in GMCH (District: KAMF | RUP METRO) on 06/07 | /2020 due to On Promotion. | |
| | | | | | |
| | | Uploaded Documen | ts - | | |

After final submission of application, a "Success" alert will appear on screen and an SMS will also be received in the registered mobile number, indicating application has been successfully submitted.

| Council Registration No. | | | | |
|--|--|-----------------------------|---|---------|
| Details of initial posting in Govt. servic | e (Regular) | | | - |
| Date of Joining: | 28/08/1992 | Name of Health Facility: | Nalbari Medical College & Hospital, Nalbari | |
| Designation: | Deputy Nursing Superintendent (Deputy Matron) | Department: | Natus voluptates exe | age & H |
| First Joining Letter: | N/A | | | |
| Details of current posting | | | | |
| Date of Joining: | | | ≩auhati Medical College & Hospital, ≩uwahati | |
| Designation: | | | lic velit aliquip ad | |
| Current Joining Letter: | | | | |
| Preference for desired place of transfe | | | | |
| | Done! | | | |
| Transfer type: | Application Consectivity Columit | ted Themlesses | | |
| Reason for seeking transfer: | Application Successfully Submit | ted. Thank you. | | |
| Has the applicant been transferred bef | | | a due to Co Decembra | |
| betails of previous postings. | ÖK | | due to on Promotion. | |
| | | | | |

4.5.4. Withdraw Application

To Withdraw a Unilateral Transfer Application, go to "Applications" section of the sidebar, select the "Pending" then click on the button shown below:

| Mr. Test Testing User Role: MCH Staff | | Pending Appl | ications | About | Me 🛛 👂 Change Password | 🖋 Edit Profile 🛛 🕞 Logout |
|--|-------|-----------------------|------------|--|------------------------|---------------------------|
| User ID: test_7503 Mobile: 3000000001 | Unila | teral Transfer | | | | |
| A MTMS Home | SI | Application Number | Submitted | Status | Action | |
| Profile - | - | | | | | |
| Apply Online 👻 | 1 | MTMSU202400004 | 21/10/2024 | Your application is currently being processed | Download Applicatio | n Withdraw Application |
| Requests - | | | | | | |
| Applications - | Mutu | al Transfer | | | | |
| Pending | SI | Application | n Number | | Status | Action |
| | | | | No pending applications!! | | |
| Resolved | | | | | | |

Then, enter the reasons for withdrawal and submit. Once approved by the MCH Admin, your application will be withdrawn.

| | | Medical Co Medical Educ Directorate c | Are you sure? Upon submission, this request will be previewed and approved by the | | (माठ) पा कल लागा थी को |
|------------------------------|-----|---|--|------|--|
| est Testing le: MCH Staff | | = Pend | MCH. Enter your reasons for withdrawal (Required) | ıt N | le 🎤 Change Password 🥒 Edit Profile 🕞 Logout |
| D: test_7503 3000000001 | Uni | lateral Tra | | | |
| e | sı | Applicati Number | Maximum allowed charcters: 200 Characters remaining : 200 | | Action |
| ~ | 1 | MTMSU2 | Close Submit | | Download Application Withdraw Application |
| | | | | | |

4.6. Apply for Mutual Transfer

To Apply for Mutual Transfer, go to "Apply Online" section of the sidebar, select the "Mutual Transfer" or click on the tab shown below:

| | Medical College Transfer Managemei weiken Medical Education and Research Department Directorate of Medical Education, Governmen | nt System (MTMS) |
|---|--|---|
| Ms. Priya Subhalakhmi Hazarika User Role: MCH Staff | Home | About Me P Change Password P Edit Profile (+ Logout |
| User ID: priye_4323 Mobile: 8134075836 ♠ MTMS Home | 1 Personal | Address _ Service |
| Profile Apply Online Requests | Details | Details |
| Applications - | 2 | |
| | UNILATERTAL | TRANSFER NUTUAL TRANSFER |

Note:

- Before proceeding to apply for mutual transfer, kindly ask your co-worker to register in the MTMS portal, and complete their profile.
- If you initiate the mutual transfer application, you will be referred to as the '1st Applicant' and your co-worker as the '2nd Applicant' throughout the system.

4.6.1. Search and Confirm the Co-worker

Enter your co-worker's User ID/Registered Mobile Number, then click on "Search" button as shown below:

| * Before proceeding to apply f | or mutual transfer, kindly ask your co-worker to register in the MTMS portal and fill the personal, address and service |
|--|---|
| letalls. * If you initiate the mutual tran system. | sfer application, you will be referred to as the '1st Applicant' and your co-worker as the '2nd Applicant' throughout the |
| All the mandatory fields are ma | rked with an asterisk (*) |
| | And And |
| Apply Mutual Transfer with (en | ter 2hd |
| ppiy mutual transfer with (eni | Mobile Number): |

Then confirm the 2nd applicant by clicking the "Confirm 2nd applicant" button.

| rou initiate the mutual transfer | utual transfer, kindly ask your co-worke application, you will be referred to as th | r to register in the MTMS portal and fill the pe le '1st Applicant' and your co-worker as the '2 | rsonal, address and service details. nd Applicant' throughout the system. | | |
|--|--|---|--|-------|--|
| e mandatory fields are marke | d with an asterisk (*) | | | | |
| y Mutual Transfer with (enter 2 le Number): | nd applicant's User ID/Registered | | | | |
| 0000007 | | Search | | | |
| | | | | | |
| | | Details of the 2nd | Applicant | | |
| Field | Details | Field | Details | | |
| Name | Mr. TF | User ID | tf_4103 | | |
| Date of Birth (DOB) | 06-07-2000 | Gender | Male | | |
| Designation | Staff Nurse | Name of Health Facility | Gauhati Medical College & Hospital, Guw | ahati | |
| | afutd@amail.com | Department | ICU | | |

4.6.2. Transfer Form Filling & Send for Approval

Fill out the Application Form for Mutual Transfer with the required details. The application can be saved as draft. If the medical staff transferred earlier, choose the "yes" in the option given. Then, enter the details of previous posting. Once confirmed, forward to 2nd Applicant for Approval as shown below:

Note: After forwarding to the 2nd applicant, 1st applicant will not be able to edit their reason/type/history of transfer any further!

| Assam Medical College & Hospital, Dibrugarh | Gauhati Medical College & Hospita | I, Guwahati |
|---|---------------------------------------|---------------------------|
| Transfer Type * | Compelling Reason for Applying Transf | er * |
| select v | | |
| | | |
| | Maximum allowed charcters: 200 | Characters remaining : 20 |
| Supporting Documents (if applicable) (Optional) | Maximum allowed charcters: 200 | Characters remaining : 20 |
| Supporting Documents (if applicable) (Optional) Choose File No file chosen | Maximum allowed charcters: 200 | Characters remaining : 20 |
| Supporting Documents (if applicable) (Optional) Choose File No file chosen Accepted documents: Medical Certificate or Report from a registered medical practitioner. Accepted format: PDF. Maximum file size: 500 KB. | Maximum allowed charcters: 200 | Characters remaining : 20 |
| Supporting Documents (if applicable) (Optional) Choose File No file chosen Accepted documents: Medical Certificate or Report from a registered medical practitioner. Accepted format: PDF: Maximum file size: 500 KB. Is Transferred Earlier? * | Maximum allowed charcters: 200 | Characters remaining : 20 |

4.6.3. Preview and Final Submit

Once the application for mutual transfer is accepted by the 2nd applicant. You can submit this application, after which, it will be forwarded to the Principal/Superintendent of your respective health facilities. clicked on "Final Submit" as shown below:

| Before p etails. If you in ystem. our appli rincipal/S | proceeding to apply for mutual transfer, kindly ask your co- itiate the mutual transfer application, you will be referred to cation for mutual transfer is ACCEPTED by the 2nd applica superintendent of your respective health facilities. | worker to register in the MTMS portal and fill the per o as the '1st Applicant' and your co-worker as the '2n nt. You can submit this application now, after which, | sonal, address and service d Applicant' throughout the it will be forwarded to the |
|---|--|---|--|
| ou canno SI No | t change your details after the 2nd applicant has final subn Particulars | nitted. 1st Applicant | 2nd Applicant |
| 1 | Application No | MTMSM202400002 | |
| 2 | Name of the Applicant | Mrs. ABDUL WYATT DOWNS ESTRADA | Mr. GTEDHJ JBIYFY |
| 3 | Transfer Reason | Medical Ground (Dependent) | Medical Ground (Sel |
| 4 | Compelling Reason for Seeking Mutual Transfer | CompellingCompellingCompelling | adsdd |
| 5 | Is Transferred Earlier | No | No |
| 6 | Previous Transfer Records | N/A | N/A |
| - | Final Submitted | No | Yes |

A preview of the application will appear on screen. Verify the correctness then check the undertaking and click on "Final Submit" to submit the transfer application as shown:

| il W | vatt downs Applicati | on Form for | | | | | |
|-----------|---|--|------------------------------|--|-----|--|--|
| str | | Preview Applicati | on Data | | | | |
| ole: | · · · · · · · · · · · · · · · · · · · | | | | | | |
| :al | Details of current posting | alls of current posting | | | | | |
| 30 | Date of Joining: | 29/07/2000 | Name of Health Facility: | Assam Medical College & Hospital, Dibrugarh | | | |
| 3 | Designation: | Head Nurse (Critical Care) | Department: | IRURE ID EUM QUOD RE | | | |
| | Assam Nurses' Midwives' & Health Visitor's Council Registration No. | e3e43r3err | | | | | |
| | Current Joining Letter: | N/A | | | | | |
| | Transfer Application | | | | | | |
| H. | Transfer type: | Medical Ground (Dependent) | | | | | |
| | Reason for seeking transfer: | king transfer: CompellingCompelling | | | | | |
| | Has the applicant been transferred before? | No | | | | | |
| | Details of previous postings: | NA | | | | | |
| | Transfer To Health Facility: | ealth Facility: Gauhati Medical College & Hospital, Guwahati | | | | | |
| | | Uploaded Docume | nts | | | | |
| | Supporting Documents: | N/A | | | | | |
| \langle | I hereby declare that the facts stated above are tr deem fit and proper. | ue to the best of my knowledge and be | lief. In case on my false si | atement, I am liable to any action the may | | | |
| | | | | Close Final Subr | nit | | |

After final submission of application, a "Success" alert will appear on screen and an SMS will also be received in the registered mobile number, indicating application has been successfully submitted.

4.7. Track Transfer Application

After submitting application through the MTMS portal, medical staff can navigate to the "Applications" section to view the status of transfer request as shown below:

| | Medical College Transfer Manage Medical Education and Research Departr Directorate of Medical Education, Govern | ement System (MTMS) nent iment of Assam | समय पात एक स्वरन स्वरज्ञा सी योर |
|---|---|---|--|
| Ms. Priya Subhalakhmi Hazarika User Role: MCH Staff | E Home | About Me | Change Password Cite Profile Council |
| User ID: priya_4323 Mobile: 8134075836 | Personal Details | \rightarrow Address \rightarrow Details \rightarrow | 3 Service Details |
| Apply Online - Requests - | | _ | _ |
| Applications | AI UNILATEI | PPLY FOR APP RTAL TRANSFER MUTUAL | LY FOR TRANSFER |

4.7.1. Pending Transfer Application

Here they can view the current status of any pending transfer request.

| | M D | ledical College Tra ledical Education and irectorate of Medical E | ansfer Manag Research Depar Education, Gove | gement System (MTMS) tment rnment of Assam | | ्रास्त्र प्राप्त एक चलन स्वयुगा की जोर |
|--|----------------------|---|---|--|------------------------|---|
| Mr. Test Testing User Role: MCH Staff | Pending Applications | | | 💄 Abou | t Me 🎤 Change Password | 🖋 Edit Profile 🛛 🕞 Logout |
| User ID: test_7503 Mobile: 300000001 | Unilateral Transfer | | | | | |
| ATMS Home | SI | Application Number | Submitted | Status | Action | |
| Profile - | 1 | MTMSU202400004 | 21/10/2024 | Your application is currently being | | |
| Apply Online - | | WTW00202400004 | 21/10/2024 | processed | Download Applicatio | Withdraw Application |
| Requests - | | | | | | |
| Applications Mutual Transfer | | | | | | |
| Pending | SI | Applicatio | n Number | | Status | Action |
| | | No pending applications!! | | | | |
| | | | | | | |
| | | | | | | |

4.7.2. Resolved Transfer Applications

Medical College Transfer Management System (MTMS) Medical Education and Research Department Directorate of Medical Education, Government of Assam **Resolved Transfer** Ms. Priya Subhalakhmi Applications Logout Me P Change Password P Edit Profile → Logout Hazarika r ID: priya_432 ile: 813407583 Unilateral Transfer Application Submitted Resolved Resolved SI Number on Status on by Remarks Action Profile Approved. 1 MTMSU202400001 09/10/2024 Application is 19/10/2024 DME Admin View Application Apply Online Requests Mutual Transfer Pending Application Number Action SI Submitted on Status Resolved on Resolved by Remarks No pending applications!!

Here they can view the list of resolved transfer applications:

By clicking on the "View Application" button, they can view the resolved application details:

| | Medical College Transfer Management System (MTMS) Medical Education and Research Department Directorate of Medical Education, Government of Assam | | | | | |
|-----------------------------------|---|--|--|--|--|--|
| Ms. Priya Subhalakhmi Hazarika | Unilateral Transfer Application | 🛔 About Me 🏓 Change Password 🥒 Edit Profile 🕞 Logout | | | | |
| User ID: priya_4323 | Application Details | Application Details | | | | |
| MODILE: 8134073536 | Application ID | MTMSU202400001 | | | | |
| Profile | Submitted on | 09/10/2024 02:48:36 PM | | | | |
| Apply Online | Application Status | Application is approved! | | | | |
| Requests | Resolved on | 19/10/2024 | | | | |
| Applications | Resolved by | DME Admin | | | | |
| | Remarks | Approved. | | | | |
| | Personal Details | | | | | |
| | Name of applicant | Ms. PRIYA SUBHALAKHMI HAZARIKA | | | | |
| | Gender: | Female | | | | |
| | Date of Birth: | 10/05/1999 | | | | |
