

**HIMACHAL PRADESH BOAD OF SCHOOL EDUCATION DHARAMSHALA-176213**  
**APPLICATION FORM FOR THE APPOINTMENT OF SUPERINTENDENT**  
**/DY.SUPERINTENDENT FOR THE CONDUCT OF EXAMINATION HELD**  
**IN \_\_\_\_\_**  
**"BIO-DATA"**

1. Name \_\_\_\_\_
2. Designation (i.e. Lecturer/TGT/C&V): \_\_\_\_\_
3. Academic Qualification: \_\_\_\_\_
4. Name of the present School \_\_\_\_\_  
 Distt. \_\_\_\_\_ Pin Code No. \_\_\_\_\_  
 Telephone No.(with Code) \_\_\_\_\_ Mobile No. \_\_\_\_\_
5. Permanent Home Address \_\_\_\_\_
6. **Name of Sub Division** \_\_\_\_\_  
 (Present School)
7. Date of Birth \_\_\_\_\_
8. Name of previous School \_\_\_\_\_  
 (If transferred within previous three years)
9. Date of Regular appointment \_\_\_\_\_ Date of Regular Appointment \_\_\_\_\_ Teaching Experience \_\_\_\_\_  
 &Teaching experience as \_\_\_\_\_  
 Lect./TGT/C & V may be show separately.
 

1. As Lecturer	:	_____	_____
2. As TGT:		_____	_____
	+		
3. As C & V		_____	_____
Total Experience :		_____	_____
10. Whether you have performed. SUPDT. 1.Centre \_\_\_\_\_ Year \_\_\_\_\_  
 the duty of Centre Supdt/ OR  
 Deputy Supdt. at your own School DY.SUPDT. 2.Centre \_\_\_\_\_ Year \_\_\_\_\_  
 or other Centre in the Previous year,  
 if so, mention the Name of Centre and year.
11. If any of your relative is appearing or not then indicate relationship and name of examination and centre. ....
12. Centre of Examination, where the candidates of your school appearing. ....

I hereby certified that all the information filled by me in my bio data are correct and best of my knowledge. If any information found false and incorrect, I will be fully responsible .

**COUNTERSIGNED**

Principal/Headmaster  
 (with official stamp)

**Full Signature of the Applicant**  
 Dated \_\_\_\_\_

( This form will be accepted when it shall be counter signed by DDO/Controlling Officer only with school stamp showing DDO No.)

For Office use only:

.....

**RULES & INSTRUCTIONS OFR THE APPOINTMENT OF CENTRE  
SUPERINTENDENT/DEPUTY SUPERINTENDENT**

1. This form duly filled by the applicant and countersigned by the concerned Principal/Headmaster should be sent to the Secretary H.P.Board of School Education, Dharamshala (Kangra)-176213.
2. The Seniority Number in the Cadre as per Seniority List in the Education department must be shown in this form.
3. Date of Regular appointment and teaching experience as Lecturer/TGT/C & V must be shown separately in this form.
4. The following teachers are eligible for appointment of Centre Superintendent /Deputy Superintendent.

Centres:

	<u>Academic Qualification</u>	<u>Teaching Experience</u>
<b>(A) <u>For Centre Superintendent</u></b>		
1. Sr.Sec.School	Lecturer	5 Years as Lecturer
2. High/Middle Schools	1. TGT 2. C&V	10 Years as TGT 15 Years as C&V
<b>(B) <u>For Deputy Superintendent</u></b>		
1. Sr.Sec.School	1. Lecturer 2. T.G.T.	3 Years as Lecturer 5 Years as T.G.T.
2. High/ Middle schools	1. T.G.T. 2. C&V	5 Years as T.G.T. 10 Years as C&V
5. <u>The teachers appointed on adhoc Basis/ P.T.A./ Para Teachers are not eligible for the appointment of Centre Supdt./Deputy Supdt.</u>		

\*\*\*\*\*