

HIMACHAL PRADESH BOARD 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/Seniority No. (i.e. Lecturer/TGT/C&V): _____
3. Academic Qualification: _____
4. Name of the School where presently working _____
 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 _____
9. Date of Regular appointment _____ Date of Regular Teaching
 & Teaching experience as Appointment Experience
 Lect./TGT/C & V may be
 shown separately.

1. As Lecturer :	_____	_____
2. As TGT:	_____	_____
3. As C&V	_____	_____
Total Experience:	_____	_____
10. Subject being taught. _____
11. Whether you have performed.

1. Centre _____	Year _____
2. Centre _____	Year _____
3. Centre _____	Year _____

 the duty of Centre Supdt.
 Deputy Supdt. at your own School
 or other Centre in the Previous year,
 if so, mention the name of Centre and year.
12. Choice of Centre, if any for Centre Supdt./ Dy.supdt with in Distt.

1. _____	2. _____
3. _____	4. _____
5. _____	6. _____
13. If any of your relative is appearing or not
 Name of school _____
 then indicate relationship, _____
 Name of Examination and Centre.
14. 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 responsible for this .

COUNTERSIGNED

Principal/Headmaster
 (with official stamp)

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

Full Signature of the Applicant
 Dated _____

P.T.O.

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 Controller of Examination 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: Academic Teaching Experience
Qualification

(A) For Centre Superintendent

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) For Deputy Superintendent

1. Sr.Sec.School	1. Lecturer 2. T.G.T. 3. C&V	3 Years as Lecturer 5 Years as T.G.T. 10 Years as C&V
2. High/ Middle schools	1. T.G.T. 2. C&V	5 Years as T.G.T. 10 Years as C&V

5. The teachers appointed on adhoc Basis/ P.T.A./ Para Teachers are not eligible for the appointment of Centre Supdt./Deputy Supdt.
