

**H.P. BOARD OF SCHOOL EDUCATION DHARAMSHALA-176213**  
**APPLICATION FORM FOR THE APPOINTMENT OF CENTRE SUPERINTENDENT/  
DEPUTY SUPERINTENDENT FOR THE CONDUCT OF EXAMINATION TO BE HELD IN \_\_\_\_\_**  
**"BIO-DATA"**

1. Name: \_\_\_\_\_
2. Designation & Sen.No.(as Lecturer/TGT/C&V): \_\_\_\_\_
3. Academic Qualification: \_\_\_\_\_
4. Name of the School where presently working: \_\_\_\_\_  
Distt. \_\_\_\_\_ Pin Code \_\_\_\_\_  
Telephone No.(with Code) \_\_\_\_\_ Mobile No(Self): \_\_\_\_\_
5. Email Id: \_\_\_\_\_ School email Id: \_\_\_\_\_
6. Name of Sub-Division of present School \_\_\_\_\_
7. Date of Birth: \_\_\_\_\_
8. Permanent Home Address: \_\_\_\_\_  
\_\_\_\_\_
9. Name of previous School: \_\_\_\_\_

10. Date of Regular appointment & Teaching experience as Lect./TGT/C&V may be shown separately as	<u>Date of Regular Appointment</u>	<u>Teaching Experience</u>
1. Lecturer: _____	_____	_____
2. TGT: _____	_____	_____
3. C&V: _____	_____	_____
Total Experience: _____ Years _____ Months		

11. Subject being taught: \_\_\_\_\_
12. Whether you have performed the duty of Centre Supdt. or Deputy Supdt. at your own School or other Centre in the previous years, if so, mention the name of Centre and Year with session  
1. Centre \_\_\_\_\_ Year \_\_\_\_\_  
2. Centre \_\_\_\_\_ Year \_\_\_\_\_  
3. Centre \_\_\_\_\_ Year \_\_\_\_\_
13. **Choice of CENTRE**, for Centre Superintendent or Deputy Superintendent within Distt.:  
1. \_\_\_\_\_ 2. \_\_\_\_\_  
3. \_\_\_\_\_ 4. \_\_\_\_\_  
5. \_\_\_\_\_ 6. \_\_\_\_\_

14. If any of your close relative is appearing or not, if yes,  
Name of school & Centre \_\_\_\_\_  
Relationship with candidate: \_\_\_\_\_
15. Centre of Examination, where the candidates of your school appearing \_\_\_\_\_
16. Whether you have been debarred permanently or for a specific period from any Board duty,  
If Yes, please clearly mention period: \_\_\_\_\_

It is certified that all the information filled by me in my Bio data are correct to best of my knowledge. If any information found false and incorrect, I will be responsible for this.

**COUNTERSIGNED**

Principal/Headmaster  
(with official stamp)

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

**RULES & QUALIFICATIONS FOR THE APPOINTMENT OF CENTRE SUPERINTENDENT/DEPUTY SUPERINTENDENT (SUBJECT TO AMENDMENTS)**

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 -176213.
2. The Seniority Number in the Cadre as per Seniority List in the Education Deptt. must be shown in the 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>
<u>(A) For Centre Superintendent</u>		
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
<u>(B) For Deputy Superintendent</u>		
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.

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