

ACCEPTANCE FORM FOR HEAD/SUB EXAMINER

Secrecy-I(17)

With reference to the Board's office letter _____ dated _____ I am to inform you that I am willing to act as HEAD/SUB EXAMINER for Matric/ Plus Two Examination to be held in March,20... I also accept the conditions mentioned in your letter quoted above.

- 1 **Name of Spot Evaluation Centre** 1 _____ 2 _____ 3 _____
(Where you want to be deputed at least three options be given within your district)
Distance from place of posting 1 _____ 2 _____ 3 _____
2. **HEAD EXAMINER or SUB EXAMINER**(Please mention) _____
3. Name(IN BLOCK LETTERS): Sh/Smt _____
Father's Name Sh. _____
4. School Address _____ Distt. _____ Pin Code _____
Telegraph Office and Telephone No _____ Mobile No _____
5. Permanent Home address _____
Distt. _____ Pin Code _____
6. Name of Previous School if transferred, _____
7. Whether the school is affiliated with the Board or not?(If working in private school)-YES/NO
8. Date of Birth _____ (_____)
9. Designation(i.e. Lecturer/TGT/C&V/LT/IT etc.) _____
10. Date of appointment on present post _____
11. **Seniority No.** as per Edu. Dept. in present post _____
12. Academic qualification(Subject wise) _____
13. **Teaching experience (X class)** 1. _____ from _____ to _____ total _____
14. **Teaching experience (+2 Class)** 1. _____ from _____ to _____ total _____
- 15 **Subject in which you want to evaluate the Answer books** _____
- 16 Whether Adhoc / Volunteer or PTA/PARA/SMC Teacher _____
- 17 Whether your son/daughter is/are appearing in March,20.. examination or not, if appearing intimate Centre of Examination _____
- 18 EXPERIENCE AS:-
1. HEAD EXAMINER(Matric/+2) _____
2. SUB EXAMINER (Matric/+2) _____

SIGNATURE OF APPLICANT

CERTIFICATE BY THE HEAD OF THE INSTITUTION

Certified that Sh/Smt. _____ is working as a Teacher/Lecturer to High/Sr. Secondary classes at present and facts stated by him/her are correct to the best of my knowledge.

(Signature)

Principal/Headmaster

Sr.Sec/High School _____

(with official Stamp)

- Note : 1 The form received without certification from the Head of the Institution shall not be entertained.
2 In case any information given above is found false, the concerned Teacher/Head of Institution countersigning form shall be held responsible.
3 The Board reserves the right to allocate nearest Spot Evaluation Centre from the of place of positing.