

COUNSELING PERFORMA FOR THE POST OF ELEMENTARY SCHOOL HEAD MASTER

Particulars of Candidates *(to be filled by candidate)*

Serial Number of Elementary School Head Master	
Name of the teacher with designation	
Father's Name/Husband Name	
Present Place of Posting	
District	
Mention Protected Category (if any)	
Mobile No.	

Options for Posting in orders of preference *(to be filled by candidate)*:

SNO	Name of School	School Code
1		
2		
3		
4		
5		

Date of Counseling:.....

Signature of the Candidate

----- for office use only: -----

Check List: (Mark (✓) for yes and (✖) for No)

- Proof of Initial appointment on Adhoc basis as well as Regular appointment
- Proof of appointment on current post
- Certificate of SC Category
- Certificate of Essential Qualification for promotion (in case of C&V teachers only)
- Proof of Preferential category (if claimed)
- Proof of 15 years of Rural Service (in case of Urban posting option)

Signature of Member/Dealing

(Committee Chairman)