

PROFORMA - B

DIRECTORATE SCHOOL EDUCATION, HARYANA

PERSONAL INFORMATION FORM FOR THE STAFF WORKING IN NON-GOVT.
AIDED SCHOOLS AGAINST THE SANCTIONED-AIDED POST AS ON 01-09-2009

(16) Awarded: (if any other		
<input type="checkbox"/> State	<input type="checkbox"/> National	<input type="checkbox"/> Other (please mention) _____
If Yes	Year of award	For the post of

(17) Couple Case		
Yes	No	If Yes (In case spouse working in Aided School, mention Place & Designation posting with School)

(18) Protected Category as per transfer policy (if any) (mark <input checked="" type="checkbox"/>)			
<input type="checkbox"/> Widow / Widower	<input type="checkbox"/> Deserted	<input type="checkbox"/> Divorcee	<input type="checkbox"/> Other (mention) _____
<input type="checkbox"/> Ortho Handicap	<input type="checkbox"/> Blind	<input type="checkbox"/> Dumb or Duff	%age handicapped ness _____
<input type="checkbox"/> NSS	<input type="checkbox"/> NCC	<input type="checkbox"/> Scout Guide	
Medical Status (if any mention detail here also attach medical certificates)			

(19) Service Record					
All Posting held during his career (beginning from current posting) on the sanctioned & aided posts					
Sr. No.	Designation	Nature of Posting Adhoc / Regular	Period		Place of posting
			From	To	

(20) Service Break if any	From	To
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(21) Summary of ACRs (Last 10 Years starting with current year)						
Sr. No.	Year of Report	Overall Grading	Integrity Doubtful (Y/N)	Any Adverse Entry / Punishment	Any Significant Achievement.	Results of Board Classes Only
1.	2008-2009					
2.	2007-2008					
3.	2006-2007					
4.	2005-2006					
5.	2004-2005					
6.	2003-2004					
7.	2002-2003					
8.	2001-2002					
9.	2000-2001					
10.	1999-2000					

(22) Description of Punishment (if any)			
Sr. No.	Year	Punishment	Brief Description
1.			
2.			
3.			
4.			
5.			
Attach details about any other achievement or activates separately (if any)			

PLACE:

DATE:

SIGNATURE WITH DESIGNATION

Verified that the information given above is correct and has been checked from
the record of the employee.

Signature of Head of
Institution with seal.