

FORMAT OF AFFIDAVIT

(On Rs. 100 Non-judicial stamp paper should be submitted after duly Notarised)

I,..... Son of/Daughter of /Wife of
aged.....resident of
in the capacity of Secretary/Manager/Correspondent/Trustee of
(name of the society/Trust with complete address as in the
 Society registration papers) take oath and state as under:

- (i) That I am Secretary/Manager/Correspondent/Trustee of.....
 (name of the Society/trust with complete address as in the society registration papers) and signing this affidavit on behalf of it for which I am fully authorized.
- (ii) That the Society/Trust has appointed required number of teaching staff including head of the requisite qualification and experience after adopting due selection procedure as per the norms and standards laid down by NCTE.
- (iii) That the Society/Trust has appointed required number of non teaching staff of the requisite qualification and experience after adopting due selection procedure as per the norms and standards aid down by NCTE after.
- iv) That the Society/Trust has appointed required number of teaching and non teaching staff which is paid through account payee cheque as per the service condition laid down in NCTE norms and standards.

(Signature of Deponent)

Verification

I above named deponent do hereby verify that the statement made by me under Para (i) to (iv) are true and correct to the best of my knowledge and belief. Nothing is false and nothing is concealed in it.

Place:

Date:

(Signature of Deponent)

FORMAT OF AFFIDAVIT

(On Rs. 10 Non-judicial stamp paper should be submitted after duly Notarised)

I,..... Son of/Daughter of /Wife of
aged.....resident of
take oath and state as under:

- (i) That I am a (Designation).....in (name
 Of the institution with address).....
- (ii) That I have been working as a full time (Designation) in
(name of he institution) since
Further, I also state that I have not accepted any
 Assignment anywhere on part time/full time basis other than this.
- (iii) That I have applied to this institution for the post ofand was
 appointed by a selection committee for the post of In the
 pay scale of Rs.....to.....and my
 present emoluments are Rs.....
- (iv) The institution is paying salary amounting to Rs.....per month
 through account payee cheque or through sending instructions to my savings A/C
 No.....in the.....Bank of
Branch.

(Signature of Deponent)

Verification

I above named deponent do hereby verify that the statement made by me under
 Para (i) to (iv) are true and correct to the best of my knowledge and belief.
 Nothing is false and nothing is concealed in it.

Place:

Date:

(Signature of Deponent).

Annexure - III

Staff Profile

To be approved by the Competent Authority of the Affiliating Body.

Name of the Institution. _____

Programme _____

Address of the Institution _____

Sl. No.	Name & Designation	Date of Birth	Qualification						Years of experience in a recognised Elementary /Secondary/ Senior Secondary School	Teaching experience in a Elementary /Secondary/ any other teacher education institution from-----to-----	Date of appointment in the present position	Mode of appointment (full time/part time).	Photographs		
			General Qualification			Professional								Research Degree/Other Eligibility Test	Subject
			Bachel or Degree/Post Graduate Degree	Subject	Division/P ercentage of Marks	Name of the programme (B.Ed/ M.Ed/any other)	Methodol ogy/ Specialis ation	Division/Perc entage of Marks							

Signature of Registrar/Director SCERT _____

Signature of Principal/Head _____

Name of University/Name of SCERT _____

Name _____

Stamp of University/SCERT _____

Stamp of Institution _____