

APPLICATION FORM FOR CONFIRMATION

1. Name of the official : _____
2. Father's/Husband's Name : _____
3. Date of Birth as per Matriculation Certificate/Service Book : _____
4. (A) Post in which originally joined : _____
(B) Date on which joined : _____
(C) Age on the date of joining : _____
(D) Particulars of service in department other than Education Department : _____
5. (A) Break in Service, if any : _____
(B) Order with regard to Condo nation : _____
6. (A) Date of joining the Education Department : _____
(B) The post in which joined : _____
7. (A) Date from which in continuous Govt. Service : _____
(B) Age on that Date : _____
8. Present post held : _____
9. (A) Post in which he/she is eligible to be confirmed : _____
(B) Grade of the Post : _____
(C) Date of completion of Probation Period : _____
(D) Date of eligibility (Original Date) : _____
10. Was he/she within the prescribed age limit qualified the time of entry in service? : _____
11. Whether the application is on regular basis on ad-hoc basis : _____
12. Whether the following requirements are in order, if not, whether exemption/relaxation has been obtained: : _____
(A) Medically examined and declare fit for Govt. service : _____
(B) Educational qualification is verified from certificates and whether the same are in accordance with the prescribed standard : _____
(C) Date of allegiance : _____
(D) Whether the character and antecedents Verified : _____

Signature of official

Certified that the particulars furnished by the official are verified to be correct as per available records.

Sign. & Seal of the Head of the Institution

ANNEXURE-A

S. No.	Name & Designation	Date of Birth	Date of Appointment State O.O. No. & Date	Age at the time of Appointment	Probation period as Offer letter	Date of Confirmation
1	2	3	4	5	6	7
Edn. Qualification at the time of appointment	Vigilance Clearance Report of Sch./Zone/Distt. level	ACR Grading from the appointment year to till year	Annual Result from the appointment year to till year	Current dated Work & Conduct Report		
8	9	10	11	12		
Whether official has been medically examined, if so, state	Whether Character & Antecedents verified, if so, state	Whether official appointed on Ad-hoc & Emergent basis as per appointment order, if so, state his/her regularization office order & date	Whether official belongs to SC/ST/OBC	Certificate from concerned teacher whether official is confirmed earlier		
13	14	15	16	17		

Signature of H.O.O. with official seal & date

NOTE: All documents should be attested by HOO with date & official seal.
Photocopies in r/o serial no. 3, 4, 6, 8, 12, 13, 14, 15 be attached.
Documents may be arranged accordingly to serial number.

SCHOOL NAME : _____

SCHOOL ID : _____ PHONE NO.: _____

ZONE : _____ DISTT. : _____

WORK AND CONDUCT REPORT

Certified that _____, Employee I.D.: _____,
is working in this school since _____ (dd/mm/yyyy) as _____
(Designation).

Certified that his/her work & conduct is **SATISFACTORY.**

Signature of H.O.S. with stamp & date

SCHOOL NAME : _____

SCHOOL ID : _____ PHONE NO.: _____

ZONE : _____ DISTT. : _____

INTEGRITY CERTIFICATE

Certified that _____, Employee I.D.: _____,
is working in this school since _____ (dd/mm/yyyy) as _____
(Designation).

Certified that his/her **INTEGRITY IS BEYOND DOUBT.**

Signature of H.O.S. with stamp & date

SCHOOL NAME : _____

SCHOOL ID : _____ PHONE NO.: _____

ZONE : _____ DISTT. : _____

CERTIFICATE REGARDING E.O.L.

Certified that _____, Employee I.D.: _____,
is working in this school since _____ (dd/mm/yyyy) as _____
(Designation) has not availed any E.O.L. on private/medical affairs till date as per his/her
service records available in this school.

Signature of H.O.S. with stamp & date

SCHOOL NAME : _____

SCHOOL ID : _____ PHONE NO.: _____

ZONE : _____ DISTT. : _____

**CERTIFICATE REGARDING DIES-NON/SUSPENSION/
BREAK-IN-SERVICE**

As per his/her service records available in the school, it is certified that there was no break in service in respect of _____, Employee I.D.: _____, who is working in this school as _____ (Designation) and his/her service has never been treated as Dies-Non. He/She has never been put under suspension.

Signature of H.O.S. with stamp & date

SCHOOL NAME : _____

SCHOOL ID : _____ PHONE NO.: _____

ZONE : _____ DISTT. : _____

NO PENALTY CERTIFICATE

As per his/her service records available in the school, it is certified that no penalty under Rule 14 or 16 of CSS (CCA) Rules, 1965 has ever been imposed upon _____, Employee I.D.: _____, who is working in this school as _____ (Designation).

Signature of H.O.S. with stamp & date

SCHOOL NAME : _____

SCHOOL ID : _____ PHONE NO.: _____

ZONE : _____ DISTT. : _____

CERTIFICATE REGARDING COURT CASE/PROCEEDINGS

As per his/her service records available in the school, it is certified that no court case is pending / court order issued against _____, Employee I.D.: _____, who is working in this school as _____ (Designation).

Signature of H.O.S. with stamp & date

SCHOOL NAME : _____

SCHOOL ID : _____ PHONE NO.: _____

ZONE : _____ DISTT. : _____

NON AVAILABILITY CERTIFICATE (NAC)

It is certified that A.C.R. for the year _____ in r/o _____, Employee I.D.: _____, who is working in this school as _____ (Designation), is **NOT AVAILABLE** in this school and hence the A.C.R. for the year _____ is being attached.

Signature of H.O.S. with stamp & date