

APPLICATION FORM

ACCOUNT TEST FOR THE HEAD MASTERS AND HEADMISTRESSES OF SECONDARY AND TRAINING SCHOOLS, DEC, 2015 , ANDHRA PRADESH

Note:- (1) Before filling the form the candidates should carefully read the instructions printed overleaf and act accordingly.

(2) Applications should reach the concerned District Educational Officers on or before the last date pre-scribed for the payment of fees through the proper channel.

REGISTER No.

(To be filled in the office)

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1. (a) Name of the candidate in full (in Block Letters) :
(b) Gender :
(c) Father's Name :
 2. Nationality :
Religion :
(Scheduled Caste/Scheduled Tribe) :
 3. Date of Birth :
 4. Centre at which candidate desires to be examined :
 5. Period of service as Headmaster, Headmistress, L.T. or B.Ed. Assistant. :
(1) Name of the School where employed. :
(2) Whether permanent or temporary. :
(3) Highest General Educational and Professional Qualifications passed. :
(4) If L.T. or B.Ed. Assistant whether he/she has completed His/her period of probation in that cadre. :
 6. Examination fee paid challan No. : Date:
(Challan to be enclosed) Name of Treasury :
 7. Papers passed, if any, previously, (Mention previous Register No. Year and the Name of Examination Centre Regd. No. Centre Year Name of Paper passed Paper I/Paper II (Paper which is not passed should be scored out) :
 8. Papers in which the candidate desires to be examined (Paper in which the candidate is not appearing should be scored out) :
 9. Postal address (in full) in Block Letters (Two self addressed envelopes) size 9" x 4 1/2" should be enclosed) Mobile.No. :
 10. Photograph and Identification marks. :



1.....
2.....

The Particulars furnished in this application are correct to the best of my knowledge.

Signature of the Candidate.

Station:.....

Date:.....

Signature of the officer who has affixed and attested the photograph

CERTIFICATE TO BE FURNISHED BY THE CONTROLLING AUTHORITY

I hereby certify that I have verified the above entries, with reference to the records of this office and I am satisfied that they are correct. The candidate is eligible to appear for the examination.

An attested photograph of the candidate is affixed on the application Form and on the Hall Ticket-cum-Identification Certificate Form.

Countersignature of the District Educational Officer.

District.....201

Municipal Secretary,
Secretary, Zilla Parishad
Correspondent, Aided Secondary School.

CERTIFICATE OF THE CHIEF SUPERINTENDENT

Certified that the identification of the candidate has been verified against the Photo and Identification mark and state that the bonafide candidate has appeared for the examination.

Station:.....

Signature of the Chief Superintendent
With designation.

Date:.....201

Centre.....

INSTRUCTIONS TO CANDIDATES

- (1) Forms containing incomplete and incorrect particulars are liable to be rejected.
- (2) Hall tickets will be dispatched direct to the candidates.
- (3) The fee for the examination is Rs. 150/- and the prescribed fee may be paid into the Treasury or Bank to the Head of Account.
- (4) The fee once paid will neither be refunded nor reserved for a subsequent examination under any circumstances.
- (5) In submitting the applications for admission to the examination the candidate will be deemed to have given an undertaking that he/she will abide by all rules now in force and those to be brought into effect hereafter.
- (6) The center should be one of those mentioned in the notification inviting applications and the center selected shall be one where the candidate resides or where he is employed or if that is not a center, the center nearest to it.

Head of Account

Major Head	0202	:	Education; Sports, arts and culture
	01	:	General Education
	102	:	Secondary Education
(SH)	06	:	Director of Government Examinations
	001	:	Other receipts

DDO Code:- 27000303001

HALL TICKET

ACCOUNT TEST FOR THE HEADMASTERS AND HEADMISTRESSES OF SECONDARY AND TRAINING SCHOOLS, DEC, 2015, ANDHRA PRADESH.

This is to certify that is a candidate for the above test to be held at (Centre) in December 2015.

His/Her Register Number is
He/She should enter this number only and not name in the answer books.

(By Order)

ADDL. JOINT SECRETARY
OFFICE OF THE DIRECTOR FOR GOVERNMENT EXAMINATIONS,
ANDHRA PRADESH, HYDERABAD.

Note:- All entries excepting the register numbers should be filled up by the forwarding authority.

INSTRUCTIONS TO CANDIDATES

PHOTO
Passport size
(Bust Photo
should be
affixed)

Signature of the candidate
Certified that
Is a candidate for the above examination and his/her signature was taken in my presence.
His/Her date of birth is
He/She bears the following clear marks of identification.

- 1
2

Station.....
Dated

Signature of the Attesting (Executive) Authority
with Designation.

Countersignature of the
District Educational Officer
District.

NOTE:- 1. The photographs should be affixed and attested by the Executive Authority of the Local Bodies.
2. The attesting officer's signature should be right across the photograph extending over the blank space also.

INSTRUCTIONS TO CANDIDATE

1. Candidate should have their Hall Ticket-cum-Identification Certificate ready with them for inspection by the Superintendent of the examination center at any time during the examination.
2. The Hall Ticket-cum-Identification Certificate should be preserved by the candidate even after the examination until the results are announced and produced if demanded during this time.
3. A copy of the time-table and instructions issued therein should be scrupulously observed.
4. Candidates should carefully scrutinize the nominal rolls put up on the Board a day or two before the commencement of the examination and inform the Chief Superintendent immediately, if there is any mistake relating to name, register number as given in the hall ticket, subjects offering medium, etc. If they fail to report promptly to the Chief Superintendent any omissions or mistakes in the nominal roll. The entire responsibility rests with the candidates.