PROFORMA- I

S1. No	Rank. No. in the senior ity list	Name & Official Address	Designatio n	Whether test qualified or not. In the case of HSA/HSST if not qualified whether eligible for test exemption, ie above 50 years age or SC/ST employees.	In the case of HSA/HSST whether 12 years of Graduate service has been available	Order No & date of declaration of probation. If probation is not declared it should be specified	Whether any disciplinary action initiated or pending. If yes give details.	Details of period in which CR is submitting	Contact phone No of the incumbent Office, Res/ Mobile	Any other Remarks
1	2	3	4	5	6	7	8	9	10	11

Certified that the facts mentioned above are true to best of knowledge in accordance with the relevant documents and found correct.

Deputy Director Education