







**PROFESSIONAL DETAILS**

1. Professional Qualification: [put √ mark on appropriate box]

D.Ed  D.El.Ed  PTTI  J.B.T. OR EQUIVALENT  BT  PGBT  B.ED  Spl B.ED

2. Year of possessing Professional Qualification:

3. Details of previous employment (if any):

1) District Name:  Circle:

Name of the School:

Designation:  Qualification:

Period of Service:

From Date:   /   /

To Date:   /   /

Transfer Memo No.

Transfer Memo No. Date:   /   /

2) District Name:  Circle:

Name of the School:

Designation:  Qualification:

Period of Service:

From Date:   /   /

To Date:   /   /

Transfer Memo No.

Transfer Memo No. Date:   /   /

3) District Name:  Circle:

Name of the School:

Designation:  Qualification:

Period of Service:

From Date:   /   /

To Date:   /   /

Transfer Memo No.

Transfer Memo No. Date:   /   /

\*4. Opted under DCRB Scheme: (Put √ mark) Yes  No

\*5. If yes, Option Exercised under: (Put √ mark)

Pension Scheme existing prior to 01.04.1981  CPF with Gratuity

Pension, Family Pension with Gratuity

