## **ERC NCTE BHUVNESHWAR**

## RAM BARAN RAY B.Ed. COLLEGE SHYAMPUR BAIRO **BHAGWANPUR VAISHALI** PIN CODE-844131

## FORMAT FOR PARTICULARS OF STAFF

Progamme). (B.El.Ed.)/B.Ed./B.Ed.(ODL)/B.P.Ed./B.Ed. (Part Time)/M.Ed/M.P.Ed./B.Ed.M.Ed. (Integrated) and B.A.B.Ed. B.Sc.B.ed. (Integrated) and Innovative Teacher Education (DPSE/D.EI.Ed./D.EI.Ed.(ODL)/Diploma in Performing Arts/Diploma in Visual Arts/Diploma in Physical Education/ Bachelor of Elementary Education Name of Teacher Education Programme:

3	=	-	(1)		No.		
Dr. Sandhya Rani 02/11/1982		PRINCIPAL / HOD	(2)	Name with Date of Birth	Name, Father/ Husband		
726791204840		00	(3)		Aadhar Card No.		
E 11 11			(4)		Self attested Photograph (front)		
OBC			(5)	Whether SC/ST/OBC Category			
Principal			(6)	Designation	on		
62%			(7)	%age of Marks (Plus 2)	Pleas from P		
62.2%			(8)	,%age of Marks (Graduation)	Please mention th from Plus 2, Gradu Qualification		
62.3% Soci			(9)	%age of Marks (Post Graduation)	e qualificatio ation, Post G		
55.06%		3	(10)	,%age Of Marks (Professional Degree-I)	Please mention the qualification relevant to the post starting from Plus 2, Graduation, Post Graduation and Professional Qualification		
63.20%			(11)	,%age of Marks (Professi onal Degree- II)			
Ph.D. (Education)			(12)	NET/ Ph.D (University) (Educatio n/other subject specify)	rting Ial		
EPC-I			(13)	Subject of Teach	ubject of Teaching		
8 Years			(14)	Number of year of Teaching Experience in TEIs / Joining date in the			

UGC/the affiliating University/Affiliating Body. The above appointmenthave been made on the basis of recommendations of the Selection Committee consultated as per the policy of the

Name & Signature of the Authorized Representate of the Body\*Date R. Bara Ray B. Ed. Colege.

Name & Counter Signature with Seal of the

Registrar/Competent Authority of the Affiliating

R A Bihar University

by submitting a written approval of the competent authority of the affiliating body as per the above format. attested photographs of staff duly countersigned by the competent authority of the affiliating body or endorsement of the same percentage of marks, teaching experience etc. alongwith attested copy of professional qualification & experience certificate and

Note: The institution shall submit the above list as per the provisions of the NCTE Regulations, 2014 indicating qualification,

## CERTIFICATE FROM THE MANAGEMENT/GOVT. INSTITUTION

- 3 All appointments are on full-time and regular basis except those specified as part-time as per the NCTE norms advice into the bank account of employee specially opened for the propose. The supporting staff shall be paid as prescribed by the UGC/Central Govt./State Govt. from time to time through account payee cheque or as per per the UGC/State Government/Central Government pay scale structure. The academic staff of the institution (including part-time staff) is/shall be paid salary in such scale of pay as
- $\equiv$ gratuity, provident fund, etc. as per law for its employees. The institution shall follow all the norms of the NCTE as amended from time to time. The management of the institution/Govt. Institution shall discharge the statutory duties relating to pension,

Muzaffarpur

Name & Signature of the anagement/Govt. Institution

Authorized Representative of the Management/Govt. Institution

Ram Baran Ray B.Ed.College Stranger Saira P.D. Handalad Shapraner Rat. Vaidadi (Silar) Pa-S44179

A separate sheet of this format shall be used for each recognized teacher education programme exclusively.

 $\equiv$ concerned Management. In case of a Govt./University Department/Aided institution the same shall be signed by managements under society/trust, the above details shall be signed by the Secretary/President/Chairman of the It may be noted by the teacher education institution that in case of self financed institutions run by private

the Registrar/Director/Principal/HOD of the institution.