

DISTRICT EDUCATIONAL OFFICE :: WARANGAL
TEACHERS ONLINE PARTICULARS

I Personnel Details of the Employee

Employee Id		Aadhar Number	
Teacher's Name		Father's Name	
Present Designation		Medium of the Post	Telugu / Urdu
Gender	Male / Female	Date of Birth	
Caste	OC / BC A / BC B / BC C / BC D / BC E / SC / ST	Mobile Number	
Marital Status	Married / Un-married / Others	PHC	NO / PHC VH / PHC OH / PHC HI
If Yes PHC %	O- 40% / 40% - 70% / 70 % And Above	Whether Spouse Is Govt. Employee	Yes / No

II Spouse Details (if Spouse Is Govt./municipal/local Body Employee)

Spouse Treasury Id		Spouce Name	
Department		Working Place	

III Residential Details

Residential Address		Residential Assembly Constituency	
Native Address		Native Assembly Constituency	
Local District (As per Study Certificates)			

IV Working Place Details

Division		Mandal	
DISE Code		School Name	
School Category	PS / UPS / HS	Management	GOVT / LB Area Plain / Agency
Medium of the School	TM / UM / TM & UM / TM & EM / UM & EM	Percentage of HRA	12/14.5/20

V Academic Qualifications

Name of The Degree	Medium	Optional 1	Optional 2	Optional 3	Board / University	Year of Passing	Percentage of Marks
SSC	TELUGU/ENGLISH/URDU						
Intermediate	TELUGU/ENGLISH/URDU						
Degree i.e. B.A.,B.Sc.etc	TELUGU/ENGLISH/URDU						%
Addl. Degree	TELUGU/ENGLISH/URDU						%
Post Graduation							%
Addl. Post Graduation							%

VI Professional Qualifications

Name of The Degree	Medium	Methodology 1	Methodology 2	Board / University	Year of Passing	Percentage of Marks
D.Ed / TTC / UG DPEd	D.Ed / TTC / UG TELUGU/ENGLISH/URDU					%
B.Ed/B.P. Ed	B.Ed/B.P. Ed TELUGU/ENGLISH/URDU					%
ADDL. B. Ed	B.Ed/B.P. Ed TELUGU/ENGLISH/URDU					%
M.Ed/M.P.Ed.	M.Ed/M.P.Ed.					%

VII Departmental Tests			
EOT	Yes/No	Month And Year of Passing	
GOT	Yes/No	Month And Year of Passing	
Language Test Telugu	Yes/No	Month And Year of Passing	
Languate Test Hindi	Yes/No	Month And Year of Passing	
Others	Yes/No	Month And Year of Passing	

VIII Service Details			
If Special Teacher Appointment Date of Joining In 398/-			
Date of Fist Appointment			
Date of Joining In The Feeder Cadre			
Date of Joining In The Present Cadre			
Date of Joining In The Present School			
Management (appointed In)	GOVT / LB	Area (appointed In)	Plain / Agency
Year of DSC		DSC List No.	Rank
If transferred in Inter Dist mention the Name of the District			
Mention the Date of Joining in the Warangal District			
If 610 transfer mention District			
SSC Handling Subject		Since (Year)	
Mention if any Disciplinary Cases			

IX OPTIONS FOR ELIGIBLE PROMOTION			
Option I		Option II	
		Option III	
		Option IV	

X Employee Bank Account Details	
Account Number	Branch
Bank	IFSC Code

XI DECLARATION
I declare that the above particulars submitted by me are true and correct and if any false information found in the above I will be personally held responsible as per CCA Rules
Signature of the Teacher

XII CERTIFICATE
I certify that the above particulars submitted by the candidate are verified with the Original Certificates and the service register of the individual and found correct as per CCA Rules
Signature of the Dy.EO / Mandal Educational Officer / Headmaster