



Government of Andhra Pradesh
Department of School Education
Application for Transfer

Date: 22/06/2012

Time: 08:14:56

Personal Details

- 1.District :
- 2.Zone Code :
- 3.Mandal:
- 4.Name of the individual seeking transfer :
- 5.Employee Code Number :
- 6.Employee Treasury Code :
- 7.Date of Birth :
- 8.Gender :
- 9.Marital Status :
- 10.Category of the Post :
- 11.Subject :
- 12.Medium of School:
13. Management of the School (Government/Local Bodies):
- 14.Name of the School:
- 15.School Code:
- 16.Category Of the School (Ex:I,II,III,IV) :
17. Whether the individual has completed 8 yrs of service as on 1st July, 2012 in all categories of posts including the service rendered in the school prior to upgradation or bifurcation :
- (If Yes, Furnish the Date of Joining)
- 18.Whether the Individual is male Headmaster Grade-II/Teacher aged below 50 years as on 1st July, 2012 of the year and working in Girls High School :
- 19.Whether the Individual is working in a school where the pass percentage in the S.S.C. Public Exam (March) is less than 10%. (Yes /No):
20. Date of First Appointment in service:
21. Date from which the individual is working in the present School in all categories of posts including prior to upgradation/bifurcation:
22. Whether he/she is President or General Secretary of the District/State of Recognized Association (Yes /No):
23. Whether spouse is employee of State Govt/Central Govt/Public Sector Undertaking/Local body / Aided Institution in the same district(in the same zone for Gazetted Head Master, Gr.II in Govt Schools) (Yes /No):
24. Whether the teacher availed the benefit under special category for spouse during the last 8 years as on 01-July-2012 (Yes /No):
25. Whether the individual availed the benefit under Preferential category during the last 8 years as on 01-July-2012 (Yes /No):
26. Whether the individual Wants to claim under Preferential category(Yes /No):
27. Performance Parameters(Yes/No):

Note :A Copy of certificate issued by the competent authority shall be enclosed to the Application form to consider their cases under special category or Preferential Category for the items 22,23,25,26.

DECLARATION

I hereby declare that the information furnished by me is correct. If any information found to be incorrect/false, my candidature can be cancelled and action may be initiated against me as per rules

Signature of the Applicant

CERTIFICATION

I hereby certify that the above particulars are verified and found correct.

Place:

Date:

Signature of the HM/MEO/DyEO

Stamp

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