## FORMAT OF AFFIDAVIT TO BE SUBMITTED BY THE STAFF

## ON RS. 10/- STAMP PAPER

	Resident of					
below:-	Resident of		take oath an	d state my bio	-Data as given	
Name of the candidate						
Father's N	Name					
Date of B	irth					
Permanen	at Address with contact No. / F	ax No.				
Educatio	nal Qualification					
Sl. No.	Degree	College and University obtained	College and University from where degree obtained		% age of marks	
1.	B.Ed.			passing		
2.	M.Ed. / MA (Education)					
3.	PG with subject					
4.	NET / SLET / Ph.D					
Experien	ce (in teacher training colleg	e) (Please attach expe	rience certificates)	l	1	
Name of college & Address		From To		Part time / regular		
Expanian	as (in sahas) (Plassa attach	vnovionos cortificato)				
Experience (in school) (Please attach e Name of school & Address		From			Part time / regular	
Traine of selfoof & Tidaless		Tiom	10	Ture time / reg	, 4141	
	hereby certify, that data sulle for any misrepresentation of		to the best of my kno	wledge and be	lief. I shall be	
I	also certify that I have	e been appointed i	in this institution a	s Principal /	Lecturer in	
			(Name of co	ollege / institu	tion will full	
details). I	also certify that I will not	work in any other ins	stitution after my joini	ng in this inst	itution without	
appointme	ent of alternate arrangement i	n the college and the	same will be intimate	to ERC-NCTE,	Bhubaneswar.	
The attest	ed copies of marks sheets / de	gree / certificates are en	closed.			

Signature of staff