National Institute of Open Schooling
Regional Centre, 10/1/H, Diamond Harbour Road, Kolkata - 27
Proforma for Empanelment of Resource Persons

Affix latest passport size photograph

Examiner		Academic facilitator		Observer		Translator	

(Please put a tick mark in appropriate box)

1. Name (in Capital letters): Dr/Prof./Mr/Ms

D D M M Y Y Y Y

2. Date of Birth: | | | | | | | | | (Applicant must be below 65 years of age)

3. (a) Educational Qualifications _____(b) Main subject at Graduation/PG level_____

4. Present Occupation: _____
(if retired, please give particulars of last position held and attach the copy of superannuation/retirement order)

5. Residential Address: _____

_____ PIN_____ Telephone No. _____

Mobile No. _____ **E – Mail:** _____

6. Name and Address of the institution serving: _____

_____ Phone nos. _____
(if retired, please give details of last office attended)

7. Name of the affiliating Board/University of your institution_____
Affiliation no. or index number of your institution _____

8. Experience:

Teaching Experience	No. of Years	Subject taught		No. of Years	Subject taught
(i) Secondary			(iii) Graduation		
(ii) Sr. Secondary			(iv) Post Graduation		

Experience in the field of Evaluation:				
	Class	No. of Years	Subject	Board/University
Head Examiner				
Examiner				

Administrative experience:		
Position held	No. of Years	Job description

Any other experience in the relevant field:

9. Languages in which you can evaluate the answer scripts: _____

* Certificate: (i) The particulars given above are correct to the best of my knowledge and belief. (ii) I have never been debarred from any exam. work of any board/university
* Please enclose the attested copy of (i) the appointment letter in case of in-service teachers; (ii) superannuation/retirement order; (iii) Address proof; (iv) Age proof, along with your application. The in-service teachers should send us the application after getting the application verified from their head of the institution as given below.
* NIOS reserves the right to cancel or reject the application without assigning any reason.

Date:
Place: Signature (Name: _____)

The informations furnished above are correct to the best of my knowledge and as per our official records.

Signature
Principal/Head of the Institution
Seal of the Institution (Name_____)

Rates for Evaluation of Answer Books (AB)

* AB of Sr. Sec. Rs 15/- (three hour papers)
* AB of Sec. Rs 12/-(three hour papers)
* AB of 1 to 2 hour papers: Rs. 8/-
* For Head Examiner Rs. 500/- per day
* Conveyance Rs. 200/- per day
* Refreshment: Rs. 50 per day

- Payment to Academic Facilitators, observers and translators will be made as per NIOS norms.