## **Municipal Administration Department**

#### **TEACHERS TRANSFERS – 2018**

#### SERVICE CERTIFICATE OF THE APPLICANT

Certified That	Sri/S	mt	W/O/H/O	
				Is working
at			school	ULB
		District. The details of	the teacher are furnished he	ere under.
Name of the Teacher	:			
Designation	:			
Employee ID No	:			
Total service in the pre	esent o	cadre:		
Date from which work	ing in	the Present School:	Present UL	В:
Pay Particulars	:			
Basic Pay	:	Rs		
Scale of Pay	:	Rs		
It is also certif	ied th	at He / she did not avail spouse	priority during the last 5/8	years for the purpose of
Transfer counselling.				
Place :			(Signature of the Cor	mmissioner with seal)
Date :				ULB
				District

## **Municipal Administration Department TEACHERS TRANSFERS – 2018**

#### WILLINGNESS CERTIFICATE TO TAKE LAST RANK

(Out side the District and Different Municipal Managements with in the District)

	I Sri/Smt	W/O/H	/0
Workir	ng as	in	school
		ULB	district
declare	ed that I have no objection to tak	e last rank in the relev	ant seniority list of my cadre in the district to
which ?	I am going to transfer.		
Place	:		(Signature of the Teacher)
Date	:		School
			ULB
			District

# **Municipal Administration Department TEACHERS TRANSFERS – 2018**

#### NO DUES AND NO ALLEGATION CERTIFICATE

Certified that Sri/Smt	t	Working as
	in	
school	ULB	district has no due
and no allegations at his/her v	working place during the period from	till to date.
Place :	(Signature of the C	ommissioner with seal)
Date :		ULB
		District

## **Municipal Administration Department TEACHERS TRANSFERS – 2018**

#### **CERTIFICATE OF SPOUSE AS GOVT EMPLOYEE**

Certified That Sri/Smt	
	Is working in State/ Central Govt/ Public
Sector/ Local body / Aided office	ce as
On	regular basis.
Name of the spouse	:
Designation	:
Employee ID No	:
Total service in the present cadre	:
Date from which working in the	
Present station	:
Pay Particulars	:
Basic Pay: Rs	
Scale of Pay: Rs	
It is also certified that He / sh Transfer counselling.	he did not avail spouse priority during the last 5/8 years for the purpose of
STATION:	
DATE:	HEAD OF OFFICE WITH DATE & OFFICE SEAL

# **Municipal Administration Department TEACHERS TRANSFERS – 2018**

#### **Declaration for National/ State Best Teacher Awardees**

Name of the Teacher Sri/Smt				
UDISE Code: Name of the School Working				
Name of the ULB				
Category of the Award (National/State)				
I declare that I am applying for transfer with these performance points and not availed this performance				
points in the last 5 Years (in case of HM Gr-II) $/$ 8 Years (in case of Teachers). If any information found incorrect				
by the authorities, I am / we are, liable for disciplinary action. (Xerox copy of the Award certificate issued by				
GoI/GoAP enclosed with the application)				
Place : Signature of the Teacher				
Date :School				

Counter Signature of the Commissioner

## **Municipal Administration Department TEACHERS TRANSFERS – 2018**

#### Declaration on Children studying in Govt. Schools

Name	of the Te	acher Sri/Smt		Designation
UDISE Code:				
Name of the U	Name of the ULB			
T 1 1	.1 .	1:11.01:	1	1. 1. 4. 6.11
				udied in the following government
school during t	ne acade	mic year 2016-17 / 2017-1	. 8.	
Admission No.	. :			
Class.	:		(2016-17)	
Class.	:		(2017-18)	
School.	:			
UDISE Code	:			
ULB/Mandal	:			
District.	:			
I here l	by declar	ed that the above informat	ion is correct and if it	is found incorrect in future by the
authorities I am liable for disciplinary action.				
Place:				Signature of the Teacher
Date :				School
Signature of He	ead Mast	er with seal		
(Where the Chi	ild Studie	ed)	Counter Signar	ture of Authority

(MEO/DyEO/Commissioner)

# **Municipal Administration Department TEACHERS TRANSFERS – 2018**

#### Certificate on Achievement of 100% Results in SSC 2018

	Name of the Tea	acher Sri/Smt	Des	signation	••••
UDISE	Code:	Na	me of the School Working		
Name o	of the ULB		Name of the District		
School	SSC Code:				
Subject	t taught by the tea	acher			
	Year	No. of Students Appeared	No. of Students Passed	Pass %	
	2017-18				
found i		•	rified with the available record	s and found correct. If it is	S
Place	:		Signature of H	ead Master with seal	
Date	:				
		Counter Signa	ature of the Commissioner		

## **Municipal Administration Department TEACHERS TRANSFERS – 2018**

#### Declaration for Unmarried Female Teachers/Headmistress Gr-II

Name of the Teacher Smt	Designation			
UDISE Code:	e School Working			
Name of the ULB				
I declare that I am unmarried till to date. Further	declare that I have not availed this preferential			
category in the last Five years (HM Gr-II)/8 years (Femal	e Teachers) If any information is found incorrect by			
the authorities I am liable for disciplinary action.				
Place :	Signature of the Teacher			
Date :	School			
Signature of Head Master with seal				

Counter Signature of the Commissioner

# **Municipal Administration Department TEACHERS TRANSFERS – 2018**

#### **Consent Certificate for Mutual Transfer**

Name of the Applicant Sri/Smt.	Designation			
UDISE Code: Name of the School Working				
Name of the ULB	t			
I am here with furnishing my willingness/Consent to give mutu	al transfer to the following teacher			
who is working in the same cadre and dealing same subject/medium				
Details of the teacher opted to mutual transfer:				
Name of the Teacher Sri/Smt.	Designation			
UDISE Code:	king			
Name of the ULB	t			
Place :	Signature of the Teacher			
Date :	School			
Signature of Head Master with seal				

Counter Signature of the Commissioner