

FORMAT FOR PARTICULARS OF STAFF TO BE SUBMITTED TO THE NRC, NCTE, DELHI

PARTICULARS OF STAFF

Session 2023-2024

Name and address of the Institution: **HARYANA COLLEGE OF EDUCATION, KINANA (JIND) Course: B.Ed.**

Sl. No.	Name with Date of Birth Age	Attested photograph of the appointed staff	Whether SC/ST/OBC/other Category	Designation	B.Ed. Yes/No	M.Ed. Yes/No	M.A (Education) Yes/No	Master's Degree in school subject Yes/No	Subject of Teaching	Ph. D. (Education/ Specify the subject) Yes/No	Passed UGC NET or equivalent Yes/No	Teaching Experience in Years	Teaching Experience in Recognized School/BEEd. College (Enclose experience certificate from the Principal)	Date of initial appointment under and NCTE Regulation under which he or she was appointed	Joining Date
					If yes, %age of Marks	If yes, %age of Marks	If yes, %age of Marks	If yes, %age of Marks & specify the subject							
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)

I. DETAILS OF TEACHING STAFF															
I(A) PRINCIPAL/HOD															
II LECTURES/TEACHING STAFF (AS PER NCTE NORMS)															
1.	Dr. Sheetal 24/10/1979		General	Lect.	Yes 56.20	Yes 56.57	Yes 60.30	Physical Science	Yes	No					13/09/16

2.	Dr. Mamta Sharma 18/07/1981		General	A.P.	Yes 65.90	Yes 65.33		Yes 60.20	S.S.	Yes	No				13/09/16
3.	MS Shelly 15/04/1982		OBC	A.P.	Yes 64.70	Yes 65.20		Yes 60.87	English		No				10/01/2017
4.	Mrs. Sunita 05/05/1981		General	A.P.	Yes 65.7	Yes 68.8		Yes 56.3	Hindi		No				28/03/2017
5.	Mr. Vinay Kumar 11-09-1983		General	A.P.	Yes 57	Yes 64.21		Yes 50	Education						11/02/17
6.	Mr. Vikas		General	A.P.	Yes 53.3%	Yes 60%		Yes 55%	Education						01/12/2017
7.	Mrs. Seema		B.C. A	A.P.	Yes 57.2%	Yes 63.12		Yes 52.1%	Education						01/12/2017

8.	Mrs. Savita 11-12-1989		General	A.P.	Yes 65.30%		Yes 67.90%	Yes 78.40%	Life Science		YES				07/05/2018
9.	Mr. Om Parkash 20-08-1976		S.C.	Librarian	Yes 63.5	M.Lib 51.8									08/03/17

The above appointment has been made on the basis of recommendations of the Selection Committee constituted as per the policy of the UGC/the affiliating University/Affiliating Body.

Name & Signature of the
Authorized Representative of the Institution

Date _____

Name & Counter Signature with Seal of the
Registrar/Competent Authority of the Affiliating Body*

- Note: The institution shall submit the above list as per the provisions of the NCTE Regulations, 2014 indicating qualification, percentage of marks, teaching experience etc. along with attested copy of professional qualification & experience certificate and attested photographs of staff duly countersigned by the competent authority of the affiliating body or endorsement of the same by submitting a written approval of the competent authority of the affiliating body as per the above format.