BOARD OF INTERMEDIATE AND SECONDARY EDUCATION, SARGODHA

APPLICATION FORM FOR APPOINTMENT AS SUPERINTENDENT / DY. SUPERINTENDENT MATRIC / INTERMEDIATE EXAMINATION 20___.

NAME OF THE INSTITUTION _______________________________ PH NO.(with Code) _______________________________

Superintendent.

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<th>PH CODE</th>
<th>NAME WITH PARENTAGE</th>
<th>N.I.C No</th>
<th>NATIONAL INCOM TAX No.</th>
<th>Name of BANK ACCOUNT No., BRANCH &amp; Bank Code</th>
<th>Home Address</th>
<th>Date of Birth</th>
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Dy. Superintendent.

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Special Instructions for the Head of Institution:-

It is requested to follow the following instructions strictly.

(i) It is requested to you that forward the names of eligible teachers only with your special recommendations.
(ii) Please do not recommend the names of those teachers who are disqualified by the Board.
(iii) The payment will be transmitted through bank directly in the bank accounts. So write the bank account No. of any bank along with branch name and Income Tax Number otherwise the payment would be stopped.
(iv) The Superintendent and the Deputy Superintendent will be dealt under “The Punjab Employees Efficiency Discipline and Accountability Act, 2006” if the information provided proved wrong.

This form can also be obtained from BISE, Sargodha website “www.bisesargodha.edu.pk”. Photocopy can also be used. No Superintendent and Deputy Superintendent will be banned for Board duty by the Head of Institution.

Signature of the Head of Institution_______________________________________

Name/ Desig. ____________________________________________________________

Cell No. ________________________________________________________________

Stamp__________________________________________________________________