

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.

PH CODE	NAME WITH PARENTAGE	N.I.C No	NATIONAL INCOM TAX No.	Name of BANK ACCOUNT No , BRANCH & Bank Code	Home Address	Date of Birth	Date of Retirement	Cell No.	SIGNATURE

Dy. Superintendent.

PH CODE	NAME WITH PARENTAGE	N.I.C No	NATIONAL INCOM TAX No.	Name of BANK ACCOUNT No , BRANCH & Bank Code	Home Address	Date of Birth	Date of Retirement	Cell No.	SIGNATURE

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 _____