

**DEPARTMENT OF SCHOOL EDUCATION
GOVT. OF WEST BENGAL
Staff Information Form
FOR PRIMARY**

PRIMARY DETAILS

1. Name*:
2. Date of Birth*:
3. Retirement Date*:
4. Sex*: Male/ Female
5. Caste*: General/ C/ ST/ OBC-A / OBC-B
6. Designation *: AT/ MATRON/ GROUP D/ SCHOOL/ MOTHER/
7. Joining Date(Present School) *:
8. Joining Date(Present Post) *:
9. First Joining Date(In This Service) *:
10. Approval Qualification*: TRAINED MATRIC / SCHOOL FINAL / MADHYAMIK,
 UN - TRAINED MATRIC / SCHOOL FINAL / MADHYAMIK,
 NON MATRIC / SCHOOL FINAL / MADHYAMIK,
 VIII PASS
11. Additional Qualification:
12. Appointment Letter Memo*:
13. Appointment Letter Date*:
14. Employee Group*:
15. Voter ID*:
16. Pay Band*:
17. Pay Scale*:
18. Pay In Payband*:
19. Grade Pay*:

20. Basic Pay*

21. Category Of Teacher: A/ B/ C/

22. Bank Name *:
(Please write the Bank Code mention in Annexure-I Bank-List)

23. Branch Name:

24. Branch Code:

25. Account No*:

26. Bank IFSC*:

27. MICR No:

PERSONAL DETAILS

28. Father's Name*:

29. Mothers Name*:

30. Religion*: Hindu/ Christian/ Buddhist/ Jain/ Muslim/ Parsi/ Others.

31. Mother Tongue*: Bengali/ English/ Hindi/ Nepali/ Santali/
 Urdu/ Others

32. Marital status: Married/ Un-Married/ Widow/ Widower/ Divorcee /
 Separate

33. Spouse Name:

34. Whether spouse is employed (put √ mark): Yes No

35. If Yes, details of employment:

36. Spouse pay:

37. Spouse HRA:

38. Spouse Opted for enrollment in health scheme: Yes/ NO

39. Residential Status: Govt. Housing/ Private Rental/ Own House /
 Spouse House/ Relative House

40. Housing Scheme Name (Whether Government Housing):

41. PAN No:
42. Aadhar ID No:
43. Assembly Constituency No:
44. Assembly Constituency Part No:
45. Voter SI.No in Part :
46. Blood Group: A+ A- B+ B- AB+ AB- O+ O-
47. Height:
48. Whether Differently Able: Yes No
49. State details:
50. Identification Mark:

CONTACT DETAILS

1. State:
2. House No.
3. Street:
4. Town/ Village:
5. Post Office:
6. PIN:
7. District:
8. Whether permanent address is **equal** to present address Yes No
9. State:
10. House No.
11. Street:
12. Town/ Village:
13. Post Office:
14. PIN:
15. District:
16. Land Tel. no:
17. Mobile no:

18. Email id:

[Grid for email ID]

PROFESSIONAL DETAILS

1. Professional Qualification: [put √ mark on appropriate box]

D.Ed D.El.ED PTT Basic BT PGBT B.ED Spl B.ED

2. Year of possessing Professional Qualification:

[Text box for year]

3. Details of previous employment (if any):

1) District Name:

[Grid for District Name]

Circle:

[Grid for Circle]

Name of the School:

[Grid for Name of the School]

Designation:

[Text box for Designation]

Qualification:

[Text box for Qualification]

Period of Service:

From Date:

D	D		M	M		Y	Y	Y	Y
		/			/				

To Date:

D	D		M	M		Y	Y	Y	Y
		/			/				

Transfer Memo No.

[Text box for Transfer Memo No.]

Transfer Memo No. Date:

D	D		M	M		Y	Y	Y	Y
		/			/				

2) District Name:

[Grid for District Name]

Circle:

[Grid for Circle]

Name of the School:

[Grid for Name of the School]

Designation:

[Text box for Designation]

Qualification:

[Text box for Qualification]

Period of Service:

From Date:

D	D		M	M		Y	Y	Y	Y
		/			/				

To Date:

D	D		M	M		Y	Y	Y	Y
		/			/				

Transfer Memo No.

[Text box for Transfer Memo No.]

Transfer Memo No. Date:

D	D		M	M		Y	Y	Y	Y
		/			/				

3) District Name:

[Grid for District Name]

Circle:

[Grid for Circle]

Name of the School:

[Grid for Name of the School]

Designation:

[Text box for Designation]

Qualification:

[Text box for Qualification]

Period of Service:

From Date:

D	D		M	M		Y	Y	Y	Y
		/			/				

To Date:

D	D		M	M		Y	Y	Y	Y
		/			/				

Transfer Memo No.

[Text box for Transfer Memo No.]

Transfer

D	D		M	M		Y	Y	Y	Y
		/			/				

*4. Opted under DCRB Scheme: (Put ✓ mark) Yes No

*5. If yes, Option Exercised under: (Put ✓ mark)

Pension Scheme existing prior to 01.04.1981 CPF with Gratuity

Pension, Family Pension with Gratuity

*4. If opted under Post 1981: (Put ✓ mark) Yes No

*Date of refund of employer's share of CPF to the Govt. Treasury:

	D		D	/		M		M	/		Y		Y		Y		Y
[]	[]	/	[]	/	[]	[]	[]	[]	[]

*Name of Treasury:

*Amount Refunded:

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
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*5. Whether any Court Case filed by the employee in connection with his/her service is pending before the Hon'ble Court: (Put ✓ mark): Yes No

If Yes, Case No:

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
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Y Y Y Y

Year:

[]	[]	[]
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Related with:

Annexure I

List of Bank:

SL. NO.	BANK NAME	BANK CODE
1	ALLAHABAD BANK	24A
2	ANDHRA BANK	24B
3	AXIS BANK	24C
4	BANGIYA GRAMIN VIKASH BANK	24D
5	BANK OF BORODA	24E
6	BANK OF INDIA	24F
7	BANK OF MAHARASTHRA	24G
8	BURDWAN CENTRAL COOPERATIVE BANK	24H
9	CANARA BANK	24I
10	CENTRAL BANK OF INDIA	24J
11	CORPORATION BANK	24K
12	DENA BANK(NEW)	24L
13	DENA BANK(OLD)	24M
14	HDFC	24N
15	IDBI BANK	24O
16	INDIAN BANK(NEW)	24P
17	INDIAN BANK(OLD)	24Q
18	INDIAN OVERSEAS BANK	24R
19	ING VYSYA BANK LTD	24S
20	ORIENTAL BANK OF COMMERCE	24T
21	PASCHIM BANGA GRAMIN BANK (A govt.Enterprise)	24U
22	PUNJAB NATIONAL BANK	24V
23	STATE BANK OF HYDERABAD	24W
24	STATE BANK OF INDIA	24X
25	SYNDICATE BANK	24Y
26	UCO BANK	24Z
27	UNION BANK OF INDIA	24AA
28	UNITED BANK OF INDIA	24AB
29	UTTAR BANGA KHETRIYA GRAMIN BANK	24AC
30	VIJAYA BANK	24AD
31	WEST BENGAL STATE COOPERATIVE BANK	24AE