DEPARTMENT OF SCHOOL EDUCATION GOVT. OF WEST BENGAL Staff Information System (DISTRICT PRIMARY SCHOOL COUNCIL)

*Name of the DISTRICT:	
OFFICE DETAILS	
*1. Name of DPSC:	
PERSONAL DETAILS	
*3. Name: First Middle Surname	
"3. Name:	
*3(a). Subsequent change in Surname (if any): DDMMYYYY	
*4. Date of Birth:	
*6. Father's Name: Middle Last	
*7. If Married Status:[Put √ mark] Yes ☐ No ☐ (If Yes, then please fill Spouse details	
a. Spouse Name: First Middle Last	
b. Whether spouse is employed: [put $$ mark] Yes \square No \square	
If Yes, details of employment: [put √ mark on appropriate box] Govt. ☐ Govt. Undertaking ☐ Govt. Aided ☐ Govt. Sponsored ☐ Private ☐	
c. Spouse's pay and HRA:	
8. Religion:[put √ mark on appropriate box] Hindu Christian Buddhist Jain Islam Parsi Others □	
9. Caste: [put √ mark] General SC ST ST OBC-A OBC-B	
*10. Whether Differently Abled: [put $$ mark $$ Yes \square No \square	
If Yes, details of employment: [put $\sqrt{\ }$ mark on appropriate box / boxes]	
HI VI MR PH	
11. Mother Tongue: [put √ mark on appropriate box] Bengali	
12. Height:	
13. Blood Group: [put √ mark on appropriate box] A+ □ A- □ B+ □ B- □ AB+ □ AB- □ O- □ O+ □	
*15. PAN: 14. Aadhaar / NPR ID:	

*16. Voter ID No:																																							
17. Identification Ma	rk:																											T					Τ	Т	Т	٦		T	1
				1	<u> </u>	<u> </u>		1		<u> </u>							1	1								I						<u> </u>							۳
CONTACT DETAIL	CONTACT DETAILS																																						
*18. Present Address	s:						_					_																											
House No.								5	Str	ee	t	L																<u>_</u>			L	L	Ţ	╧	\perp]
Town/Village																												丄					L	\perp	\perp	\square	\Box	L	
Post Office:																																							
District:																												L		F	PΙΝ	1							
*19. Whether permanent address is same to that of present address? (Put √ mark):Yes ☐ No ☐																																							
Permanent Addr	ess:																																						
House No.								9	Str	ee	t																												brack brack
Town/Village																																							
Post Office:		—																										T					T	T	T				Ì
District:																												Ī		F	ΡIΝ	1	Ī	Ī	Ť	T	T]
*19 (a). Address at t	*19 (a). Address at the time of entry in service (Put $\sqrt{\text{mark}}$, if same as 19 \square):																																						
Permanent Addr				٠.	· · ·	. ,			J. •		- (. ~		•			٠, .		<i>.</i>		uo	_			٠.														
House No.	C55.	Π			T	T	1		Str	-66	+ Г												T	T										\top	\exists	\exists	\exists	П	1
Town/Village		<u> </u>	<u> </u>		<u> </u> 	1	<u> </u>	Γ.	J (.	Т	T					<u> </u>	T		<u> </u>		l	<u> </u>	<u> </u>			<u> </u>	1	누			=		H	十	\pm	寸	+	H	ī
Post Office:		\equiv		<u> </u>	1	1						<u> </u> 	1			<u> </u>	<u> </u>			<u> </u>		1					<u> </u>	÷					÷	\pm	\pm	\equiv	\dashv	<u> </u>	J T
		H			<u> </u>	<u> </u>	1	<u> </u>	<u> </u> 	1		<u> </u>				1			<u> </u>	<u> </u>	<u> </u>						<u> </u>	누	<u> </u>		<u> </u>	<u> </u>	늗	ㅗ	ㅗ	ᆜ	ᆜ	<u>_</u>] 1
District:		Щ																												F	ΡIΝ	1	L	\perp			\perp]
20. Land Tel. no:													(\	۷it	th	ST	D	Co	ode)																			
21. Mobile no:																																							
22. Email id:												Ī																\mathbb{L}						I	I				
PROFESSIONAL DETAILS																																							
1 1101 2001011/12 2	, ,		<u></u>)	D	N	1	Μ		Y	Υ	′ \	′ `	Y																					
*23. Date of Joining	(at	se	rvi	ce	e)					/			/																										
*23(a). Appointmen	t Me	em	io I	No)																																		
							D	D)	Μ	M	1		Υ	Υ	Υ	Υ	_																					
*23(b). Appointmen	t Me	m	0 [Эa	te				/	'			/																										
*24. Date of joining the present post: D D M M Y Y Y Y / /																																							
*25. Designation: (put $\sqrt{\ }$ mark on appropriate box): Chairman \square COF \square AIS \square SAE \square LA \square HC \square *25. Designation: (put $\sqrt{\ }$ mark on appropriate box): ACC \square UDC \square STENO \square CASHIER \square LDC \square CC \square Typist \square AC \square C-C-T \square PC \square WS \square DMO \square RS \square GR.D \square Duftary \square NG \square																																							
*26. Educational Qualification: (put √ mark on appropriate box):																																							
Below MP□ M	Р 🔲	ŀ	HS] _P	as	s G	ìra	du	ate	e□		Hc	ons	s. (Gra	ad	ua	te[Po	st	: G	ra	du	at	e[LI	_B]	D(CE]			

*27. Whether Un	der Suspension:	Yes	No 🗌					
If Yes:	a) Date of effect		/	DD/MM/Y	YYY			
	b) Last basic pay							
*28. History of t	ransfer, if any:							
1) Name	of the DPSC:							
Distr	ict Name:							
Perio	d of Service: Fror	n /	/	To	/	/		
Transfer Me	emo No of WBBPE:			Date				
	overed under West Borement benefit), sche	-		nment edu	cational in Yes 🗌	stitutions	employ	yees
*30. Option Exe	ercised under: (Put √	mark)						
Pensio	on Scheme existing p	rior to 01.04.1	981 🗌					
	ith Gratuity							
	on, Family Pension wi der Post 1981 Pensio	•						
Name of T		iii -Scrienie						
	•			D	D M M	YYY	Υ	
Date of re	fund of employer's sh	are of CPF to	the Govt. Tre	asury:	/	/		
Amount R	efunded:							
Name of I	Bank:			Depos	sit Date	D M I	<u>м ү</u>	Y Y Y
	y Court Case filed by Hon'ble Court: (Put √		in connection		er service	is pending)	
If Yes, Ca	se No:]			
Y	YYY							
Year:	Related v	with:						
SALARY DETA	<u>AILS</u>							
*33A. Pay Band	No (as per ROPA-20	09):	*33B. Pay in	Pay Band :				
*34. Grade Pay	:							
*35. Dearness A	Allowance :							
*36. HRA	:							
*37. MA :								
*38. CPF (Govt	share), if any :							

DEDUCTIONS:

39. Professional Tax :		
40. Income Tax, if any:		
41. PF subscription:		
42. CPF subscription (own share) :		
43. GSLI/GIS:		
44. Salary Savings:		
45. Co-op:		
46. PF Loan recovery :		
a. Total Loan in Rs		
b. Total installment no		
c. Cumulative recovery in Rs		
d. Cumulative installment no		
e. Current installment amount in Rs		
BANK A/C DETAILS:		•
*47. Savings Bank		
*48. Savings Bank Branch Name (with Code):		
*49. Savings Bank Account No (Salary Account No):		
*50. Bank IFSC code:		
 Staff's Signature with date	DDO Signature	with date
Instruction Sheet for filling up of form To be filled up by OFFICE staffs		
(a) All the fields to be filled up in English only in Block		

- (b) Please fill up all the fields. (*) marked fields are mandatory.
- (c) Please put one Character/ Letter/ Number in one box.
- (d) Tick ($\sqrt{\ }$) mark should be put in the appropriate box from among the various options.
- (e) For Sl. No. 6 & 7, if father or spouse is dead, 'LT' to be prefixed before name.
- (f) Items at 39 to 46 may be filled up but need to be updated every month for the purpose preparing salary requisition.