

**Study Centre No. (If school is Study Centre of D.El.Ed)**

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**To**

**The Regional Director (NIOS)**

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**Latest Passport  
size photograph of  
Centre Supdt.  
with seal of the  
school/institutions**

**Sub: Acceptance to act as Superintendent of Examination Centre for National Institute of Open Schooling (NIOS) for the Diploma in Elementary Education (D.El.Ed) Examination proposed to be held in**

\_\_\_\_\_.

Sir,

I hereby accept to offer my School/Institution as an Examination Centre to NIOS and to act as Centre Superintendent for Diploma in Elementary Education (D.El.Ed) for \_\_\_\_\_ Examination.  
(Month & Year of Exam)

I hereby undertake that I will conduct the examination strictly as per Guidelines to be supplied to me by NIOS as well as free and fair manner. I certify that no near relative of mine is appearing for these examinations.

1. Complete address of the School (in BLOCK LETTERS)

PIN CODE: _____

Yours faithfully,

Signature with Name of Principal (In Block Letters)

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2. Name, Designation and Residential address of the Centre Superintendent

PIN CODE: _____

Signatures of Centre Superintendent, if Principal is not acting as Centre Superintendent

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Tele (O):  
Tel (R):  
(with STD Code)

Signature Attested by the Principal

Fax:

Mobile:

Seal of the Institute/School

E-Mail:

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**Please indicate below the Bank details of the School in whose favour the Payment for Centre Advance should be released i.e.**

Name of the Account Holder _____
Account No. _____ Name of Bank & Branch, _____ IFSC Code _____
of the bank to transfer the amount directly to the above mentioned account.

**Notes:**

1. The Principal of the school/Institution should act as Centre Superintendent, Deputy Superintendent may be appointed by the Centre Superintendent from the senior faculty of the school/Institutions if the total number of candidates allocated is 250 or more. Only in exceptional circumstances the Vice-Principal or the Senior-most faculty PGT/TGT of the school may be nominated as the Centre Superintendent -

**Please give all the telephone numbers of Institution (as well as the mobile number of Principal). Please provide PP number for contact, if there is no telephone at the office/residence of the Cent. Suptd. and a convenient Fax No. & email id in which urgent message may be faxed to you.**

**Other information and Physical facilities available in the School/Institution**

2. (a) The Name of the Boards/University with which School/Institution is affiliated:

\_\_\_\_\_

(b) Affiliation No. & its year of validity: \_\_\_\_\_

3. The number of rooms and their size available for examination: \_\_\_\_\_
4. Does the School/Collage have CCTV in the room/hall  
to be used for the conduct of examination Available/Not Available
5. Does the School/Collage have a hall (to be used for the examination)? **(YES/NO)**  
If yes, mention size of the hall : \_\_\_\_\_ (in sq. m.)
6. Does the Schools have boundary wall? **(YES/NO)**
7. Does the School/Collage have separate Toilet for both Girls & Boys? **(YES/NO)**
8. Does the School/Collage have drinking water facility? **(YES/NO)**
9. In the case of availability of Computer Lab please indicate the number of computers: \_\_\_\_\_
10. Please furnish the following information with regard to Post Office from where sensitive material is to be dispatched by the Examination Centre in the evening of the Exam on each day.  
Name and Complete address of the Post Office with Pin Code: \_\_\_\_\_

11. Distance of School/Institution:
- |                      |       |             |
|----------------------|-------|-------------|
| From Railway Station | _____ | Kilometers. |
| From Bus Stand       | _____ | Kilometers. |
| From Post Office     | _____ | Kilometers  |
| From Police Station  | _____ | Kilometers  |
| From Bank            | _____ | Kilometers  |

12. Name of the nearest Police Station with Tel. No.: \_\_\_\_\_

**Date:** \_\_\_\_\_

**(Signatures of Principal with Seal)**