

No. EDN-U(E-1)Type test clerks/2020- 2054
Office of the Deputy Director of Hr Education
Una,Distt Una (HP)
Dated: Una-174303 Oct, 2020

To

✓ All the heads of
Govt colleges/GSSS /GHS In Una Distt
The Officer commanding ,
6 HP (i) Coy NCC Una

Subject: Regarding conduct of type test for clerks.

Meo:

In compliance with Directorate of Hr Education H.
P Shimla Memo No. EDN-HE(1)B(2)-2/2020 –TT-Clk dt 12.6.2020
on the subject cited above.

It is intimated that the type test of clerks working in
various offices/institutions under secondary education in Una Distt
will be conducted in the office of the undersigned on dated
10.11.2020

You are therefore, requested to direct the clerks
working in your office/institution who has not passed the type
test so far to report in this office at 10.00AM on the above date.
For this purpose a proforma is enclosed herewith which is required
to be filled up by the Head of office/institution with his stamp and
signature.

MRG
Deputy Director of Hr Education,
Una,Distt Una (HP)

Personal BIO Data of the official who is appearing in Type Test to be conducted by
 Directorate of Higher Education ~~Himachal Pradesh~~ Uttar as on _____

| 1. | Name of the Candidate | | | | | | | | | |
|-----------------|--|---|-----------------|--------|----------|-------|----------|-------|----------|-------|
| 2. | Photograph of the candidate (Duly attested) | | | | | | | | | |
| 3. | Name of Father/Husband | | | | | | | | | |
| 4. | Name of the Institutions | | | | | | | | | |
| 5. | Date of birth | | | | | | | | | |
| 6. | Date of first Appointment <u>as clerk</u> | | | | | | | | | |
| 7. | Date since working in the Present institutions | | | | | | | | | |
| 8. | Educational Qualification | | | | | | | | | |
| 9. | Mode of recruitment (i.e. Direct recruitment or on compassionate grounds or Service takeover or by promotion etc.) | | | | | | | | | |
| 10. | Whether appointed on regular or on contract basis or Daily wages basis. | | | | | | | | | |
| 11. | Whether earlier appeared in type test, if appeared, Date and result of each attempt be given separately | <table border="1"> <thead> <tr> <th>Date of Attempt</th> <th>Result</th> </tr> </thead> <tbody> <tr> <td>1. _____</td> <td>_____</td> </tr> <tr> <td>2. _____</td> <td>_____</td> </tr> <tr> <td>3. _____</td> <td>_____</td> </tr> </tbody> </table> | Date of Attempt | Result | 1. _____ | _____ | 2. _____ | _____ | 3. _____ | _____ |
| Date of Attempt | Result | | | | | | | | | |
| 1. _____ | _____ | | | | | | | | | |
| 2. _____ | _____ | | | | | | | | | |
| 3. _____ | _____ | | | | | | | | | |

Signature of the Official

Signature of Head of the Institutions with seal