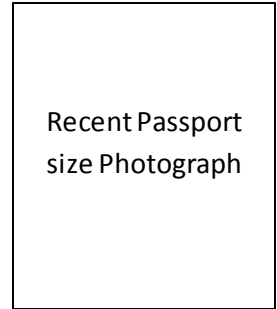


One passport size photograph duly attested on Back side by the principal of ITI be attached in separate envelope. The photograph should not be defaced in anyway



**PROFORMA FOR RECOMMENDATION FOR STATE AWARD : PRINCIPAL**

Part A should be filled in by the individual. Part B should be filled in by the principal based on Trainees daily diary and other records kept by the principal, examination results of the trainees & service book and to be authenticated by the Inspector of Training

**PART A**

Particulars of the Principal

- 1 Name (in Block letters) :
- 2 Gender :
- 3 Designation :
- 4 Name of Institute :
- 5 Date of Birth :
- 6 Age as on 31/12/2018 :
- 7 Date of retirement/ Superannuation :
- 8 Academic Qualification

| Sl.No | Examinations passed | University/ Board/<br>Department | Year of<br>Passing | % of marks<br>obtained |
|-------|---------------------|----------------------------------|--------------------|------------------------|
|       |                     |                                  |                    |                        |

9 Service Details from the date of entry

| Sl.No | Designation | Trade / ACD | Name of Institute | Period |    |
|-------|-------------|-------------|-------------------|--------|----|
|       |             |             |                   | From   | To |
|       |             |             |                   |        |    |

10 Details of compulsory training

| Name of programme |    | Duration |    | Name of CTI/ATI | Whether passed or not |  |  |
|-------------------|----|----------|----|-----------------|-----------------------|--|--|
|                   |    | From     | To |                 |                       |  |  |
| CTI               |    |          |    |                 |                       |  |  |
| Modular Training  | M1 |          |    |                 |                       |  |  |
|                   | M2 |          |    |                 |                       |  |  |
|                   | M3 |          |    |                 |                       |  |  |
|                   | M4 |          |    |                 |                       |  |  |

11. Other Training Programmes attended

| Name of Programme | Duration | Centre of Training |
|-------------------|----------|--------------------|
|                   |          |                    |

13. Whether the officer undergone any disciplinary action ( memos, suspension, censure etc. ) for the last 10 years ; Yes/ No

If yes give details

13. Declaration by the Individual

All the particulars given above are authentic.

Place:

Signature

Date:

Name

14. Verification and Recommendation Report

Certified that I have verified all the relevant documents based on which details are given and found that the details provided are true and correct. I also Recommended to Sri/Smt:..... For best Principal Award.

Place:

Signature of Inspector of Training

Date:

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**For Office use**

**Remarks by the Verification Officers:**