Teacher Consent Format

[To be signed by the concerned subject teacher and duly counter signed by the Head of the Institution]

FOR TEACHING THE SUBJECT	
Category of Teacher: [Tick only the correct option a	and fill the blanks, if asked for]
1. Permanent teacher of lower scale for the subject _	
2. Retired teacher duly qualified and experienced for	the subject
3. Duly qualified part time teacher engaged by the sc	hool
4. Government Contractual teacher vide Memo NO _	dted
5. Teacher of Self financed school	
I , Sri/ Smt	being engaged as a Teacher at
	[Name of School] with subject
having qualifications	and category mentioned above do
hereby declare that I will abide by the following term	ns and conditions:
 That I am ready to take classes at XI and XII That I will act as an Examiner cum Scrutineer Council. That I will never claim higher pay scale / any teachers getting lower scale of Govt / Govt A 	of HS Examination, if appointed by the other extra financial benefit. [only for
	Signature of Assistant Teacher
	Date :
	Contact No :
Counter Signed by :	
(Signature of Head of the Institution with date)	
Institution Code :	