

Annexure - II

APPLICATION FOR REGISTRATION OF COLLEGE TEACHER NCTE, BHOPAL



1. Code No. of the college RG, No. D/TNG/DPRT/P.T.C. 6363
Dt. 20/03/1963/DE AHMEDABAD
2. Name of the college N.C.T.E. CODE: 312019 Dt. 14/02/98
Address with Telephone Nos. STREE ADHYAPAN MANDIR,
CHITRASANI, TA.-PALANPUR
DIST.-BAMASKANTHA (N. GUJARAT)
3. Name of the teacher DISP. BANASKANTHA (N. GUJARAT)
Surname/Name DESAI
PIN:-385010
4. Date of Birth & Age 284279 (2074) DESAI DINESHBHAI KHETABHAI
01-06-1964
5. Educational Qualifications M.Sc. B.Ed.

Degree	Year of Passing	Division/ Percentage of Marks	University	Remarks
Bachelor Degree <u>B.Sc.</u>	<u>1988</u>	<u>II</u>	<u>56.66% Guj. Uni. A/BAD</u>	<u>-</u>
Post Graduate Degree	<u>2006</u>	<u>II</u>	<u>57.68% KAMARUPA Uni. KAMARUPA (N.)</u>	<u>-</u>
M.A./M.Sc.	<u>1990</u>	<u>I</u>	<u>71.50% N. Guj. Uni. PATAN (N. Gu)</u>	<u>-</u>
B.Ed.				
M.Ed.				
M.Phil/Ph.D.				

6. Home Address of Teacher Shri D.K. Desai
At & Po:- Chitrasani TA:- Palanpur Dist:- B.K.
PIN:- 385010 North Gujarat.
7. Name of Witness
Name & Address : 1. Shri P. L. Tala
At:- Chitrasani
TA. Palanpur Dist. B.K. Signature [Signature]
2. S.P. Gogna
At:- Palanpur Dist. B.K. Signature [Signature]

This is to certify that the information given above is true and as per my academic records for which I shall be responsible.

Signature of Teacher

Recommendations of the college concerned

I hereby recommend WRC, NCTE to register Shri/Smt./Ms. D.K. Desai who is faculty member of our institution. I also certify the testimonials of the teachers.

Signature of Principal
Principal
At:- Palanpur Dist. B.K.
Chitrasani Ta. Palanpur (B. K.)