

OFFICE OF THE DIRECTOR OF GOVERNMENT EXAMINATIONS  
ANDHRA PRADESH: HYDERABAD

Re.No.276/E1/2011.

Dt.21-10-2011

PRESS/MEDIA NOTE  
HEAD MASTER ACCOUNT TEST  
DECEMBER 2011

It is hereby notified that the **HEAD MASTER'S ACCOUNT TEST** will be conducted on 30-12-2011 and on 31-12-2011 i.e.; paper I & paper II respectively at the following places. 1). Visakhapatnam 2). East Godavari 3). Vijayawada 4). Guntur 5). Kadapa 6). Warangal and 7). Hyderabad. The following are the due dates for remittance of Examination fees and submission of application forms:

Sl. No	Particulars of Fee	Due date for remittance of Exam fee by the Candidates	Due date for submission of applications at the O/o DEO concerned by the candidates	Due date for submission of Applications by the DEO's office of this office
01	Examination fee of Rs.150/- Without late fee	10-11-2011.	21-11-2011	24-11-2011
02	With a late fee of Rs.60/- (Rs.150+60 = Rs210/-)	25-11-2011	28-11-2011	01-12-2011

The Examination fee is Rs. 150/- for appearing for 2 subjects & Rs.100/- for 1 subject which should be remitted through Demand Draft either in SBI or in SBH in favour of **Secretary to the Commissioner for Government Examinations; A.P., Hyderabad**. The candidates who desire to appear for the Examination are informed to obtain the application forms from the District Educational Officer concerned.

TIME - TABLE

DAY & DATE	TIME	SUBJECT
30-12-2011 (Friday)	11.30 a.m To 2.30 p.m	PAPER -I (WITHOUT BOOKS)
31-12-2011 (Saturday)	11.30 a.m To 2.30 p.m	PAPER -II (WITH BOOKS)

Sd/- B. Manmadha Reddy  
**DIRECTOR.**

30 Copies to The Commissioner & Director Information and Public relations with a request to make arrangements to publish the contents of the Press/Media note in print and electronic media under news item.

To  
All the District Educational Officers/ACGES in the State for information with a request to issue similar Press/Media note to publish/ scroll in local print and electronic media and for further course of action.

Copy to all RJDSES in the state for information  
Copy submitted to the Commissioner & Director of School Education, A.P. Hyderabad for favour of information.  
Copy submitted to the Principal Secretary (S.E) to Government for favour of information.  
Copy submitted to P.S to Hon'ble Minister for Secondary Education for favour of information.

// ATTESTED //

DEPUTY COMMISSIONER

22/10/11

## APPLICATION FORM

ACCOUNT TEST FOR THE HEADMASTERS AND HEADMISTRESSES OF SECONDARY AND TRAINING SCHOOLS, APRIL/OCTOBER, 200 . ANDHRA PRADESH.

- Note:- (1) Before filling the form, the candidates should carefully read the instructions printed overleaf and act accordingly.
- (2) Applications should reach the concerned District Educational Officers on or before the last date prescribed for the payment of fees through the proper channel.

REGISTER No.

(To be filled in the office)

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1. (a) Name of the candidate (in full)  
in block letters.  
(b) Sex
  2. Nationality  
Religion  
(Scheduled Caste/Scheduled Tribe)
  3. Date of Birth
  4. Centre at which candidate desires to be examined.
  5. Period of service as Headmaster, Headmistress, L.T. or B.Ed., "Assistant.
    - (1) Name of the School where employed
    - (2) Whether permanent or temporary
    - (3) Highest General educational and professional Qualification passed
    - (4) If L.T. or B.Ed., Assistant whether he/she has Completed his/her period of probation in that Cadre with reference to paragraph 2 of the Notification inviting applications.
  6. Examination fee paid, Challan No....Date 20  
Name of the Treasury (Challan to be enclosed)  
Reg.No. Centre Year Name of Paper passed
  7. Papers passed if any previously Paper I / Paper II (Mention previous Register No. Year and (Paper which is not the Name of the Centre of the Examination) passed should be scored out)

8. Papers in which the candidate desires to be examined.  
(Paper in which the candidate is not appearing  
should be scored out).

Paper-I/Paper II

9. Postal address (in full) in Block letters.  
(Two self-addressed envelopes) of size 9”X4 ½ “ should  
be enclosed).

10. Photograph and Identification marks :

PHOTO  
Passport size  
(Bust photo  
should be  
affixed here)

1. \_\_\_\_\_

2. \_\_\_\_\_

The particulars furnished in this application are correct to the best of my knowledge.

Station : —

Date : —200

Station .....  
*affixed*

Date .....200

*Signature of the Candidate.*

*Signature of the Officer who has*

*and attested the photograph.*

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**CERTIFICATE TO BE FURNISHED BY THE CONTROLLING AUTHORITY**

I hereby certify that I have verified the above entries, with reference to the records of this office and I am satisfied that they are correct. The candidate is eligible to appear for the examination.

An attested photograph of the candidate is affixed on the application form and on the Hall Ticket-cum-Identification Certificate Form.

*Counter-Signature of the District Educational Officer.*

*Municipal Secretary  
Secretary, Zilla*

*Parishad  
District—200  
School*

*Correspondent, Aided Secondary*

## HALL TICKET

ACCOUNT TEST FOR THE HEADMASTERS AND HEADMISTRESSES OF SECONDARY  
AND TRAINING SCHOOLS, APRIL/OCTOBER, 200 . ANDHRA PRADESH.

This is to certify that \_\_\_\_\_ is a candidate for the  
above test to be held at \_\_\_\_\_ (Centre) in April/October, 200

His/Her Register Number is \_\_\_\_\_

He/She should enter this number only and not name in the answer books.

(By Order)

Office of the Commissioner for Government Examinations,  
Andhra Pradesh, Hyderabad.

SECRETARY

NOTE:- All entries excepting the register numbers should be filled up by the forwarding  
authority.

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INSTRUCTIONS TO CANDIDATES

*Signature of the candidate*

PHOTO  
Passport size  
(Bust Photo  
should be  
affixed here).

Certified that \_\_\_\_\_

Is a candidate for the above examination and his/her signature was taken  
in my presence. His/Her date of birth is \_\_\_\_  
He/She \_\_\_\_Ft\_\_\_\_Inches in height and bears the following clear marks of  
identification.

1. ....
2. ....

Station \_\_\_\_

Signature of the Attesting (Executive) Authority  
With Designation.

Dated \_\_\_\_200

Counter-Signature of the  
District Educational Officer \_\_\_\_  
District \_\_\_\_

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1. NOTE :
1. The photographs should be affixed and attested by the Executive Authority of the Local Bodies.
  2. The attesting officer's signature should be right across the Photograph extending over the blank space also.

## INSTRUCTIONS TO CANDIDATES

1. Candidates should have their Hall Ticket-cum-Identification Certificate ready with them for inspection by the Superintendent of the examination centre at any time during the examinations.
2. The Hall Ticket-cum-Identification Certificate should be preserved by the candidate even after the examination until the results are announced and produced if demanded during this time.
3. A copy of the time-table and instructions issued therein should be scrupulously observed.
4. Candidates should carefully scrutinise the nominal rolls put up on the Board a day or two before the commencement of the examination and inform the Chief Superintendent immediately, if there is any mistake relating to name, register, number as given in the hall ticket, subjects offering, medium, etc. If they fail to report promptly to the Chief Superintendent any omissions or mistakes in the nominal roll, the entire responsibility rests with the candidates.

**Certificate of the Chief Superintendent of the Examination Centre**

Certified that the identification of the candidate has been verified against the photo and identification marks and state that the bonafide candidate has appeared for the examination.

Centre\_\_\_\_

Date\_\_\_\_

Signature of the Chief Superintendent

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