



FORMAT OF AFFIDAFIT TO BE SUBMITTED BY THE STAFF

(ON 10 RUPEES HON-JUDICIAL STAMP PAPER SHOULD BE SUBMITTED AFTER DULY NOTARIZED)

I, Salim Mondal, S/O – Khaleque Mandal, Age – 26, Resident of, VIII – Elamnager, PO – Chandpur, PS – Novida, Dist – Murshidabad, Pin-742121, West Bengal, take oath and state my Biodata is given below

NAME OF THE CANDIDATE	Salim Mondal
FATHER'S NAME	Khaleque Mandal
DATE OF BIRTH	10/05/1991
PERMANENT ADDRESS WITH CONTACT NO	Vill – Elamnager, PO – Chandpur , PS – Nowda, Dist – Murshidabad, Pin-742121, West Bengal MOBILE NO 9593495892

on of the Blay of Life 20.12 by the deoperate Sir

INDRANI SARKAR (KUNDU)

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1.	B.P.Ed.	Jadavpur University	2014	66.93
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I, here by certify that data submitted above is true to the best of my knowledge & belief. I shall be responsible for any misrepresentation of facts.

I, also certify that I have been appointed in the institution as Lecturer in Bengal College of Education (for B.Ed. course). I, also certify that, I will not work in any other Institution after my joining in the above said institution without appointment of alternate arrangement in college & the same will be intimated to ERC-NCTE, Orissa. The attested copies of mark sheet/ degrees/ certificate are enclosed.

HOTARY Regn No. B1/2007 ROM of WB) &

Signature of the Staff

Salim Monday

MDRANI SABKAR (EUNDU)

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Govt of West Bringel

Regn. No.-51/07, stea, will, India