

**U.T. ADMINISTRATION OF
DADRA & NAGAR HAVELI AND DAMAN & DIU
DIRECTORATE OF EDUCATION
SAMAGRA SHIKSHA**

EDN/SS-DNHDD/Rec. of Counsellor/2022-23/2453

Date: 05/10/2022

ADVERTISEMENT

Samagra Shiksha, Directorate of Education, U.T Administration of Dadra & Nagar Haveli and Daman & Diu, invites applications from the eligible candidates to engage Counsellor purely on short Term Contract (STC) basis for Daman District. The details are as follows: -

Sr. No.	Name of the Post	No. of Post	Qualifications	Age Criteria	Honorarium per month (Rs)
1	Counsellor for (Daman District)	01	<ol style="list-style-type: none"> Post Graduate from recognized University in Psychology with at least 50% marks. Degree/Diploma in educational & Vocational Guidance and Counselling. <p>Desirable: Some Academic and administrative experience.</p> <p>(Note: The candidate should have studied in the concerned medium at Secondary level).</p>	<ul style="list-style-type: none"> Not Exceeding 35 years. Upper age limit relaxable as per Orders/ Guidelines issued by Central Government from Time to time. 	15,000/-

The willing and eligible candidates may submit the duly filled Application in the prescribed format (enclosed herewith) dully signed along with copy of relevant documents should reach to the Office of the Department of Education, Samagra Shiksha Room 13, 2nd floor, Secretariat, 66Kv Road, Amlil Silvassa Dadra & Nagar Haveli District, OR Directorate of Education, opp. Pergola Garden, Fort Area, Moti Daman, UT of Dadra & Nagar Haveli and Daman & Diu. The application should be submitted on before 25/11/2022 05:00 P.M. The application received after the due date shall not be entertained.


(Jatin Goyal)
Director of Education
Samagra Shiksha
U.T. of DNH&DD

**U.T. ADMINISTRATION OF
DADRA & NAGAR HAVELI AND DAMAN & DIU
DIRECTORATE OF EDUCATION
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Application for the Post of Counsellor

*Paste self-attested
recent passport
size Photograph*

1.	Applicant's Name			
2.	Father's Name			
3.	Residential Address			
4.	Mobile No.			
5.	Email Id			
6.	Date of Birth			
7.	Age as on last date of application	Years	Months	Days

(Tick in the below boxes as applicable)

8.	Gender	Male	Female		
9.	Caste category (Whether SC/ST/OBC)	SC	ST	OBC	Un-reserved
10.	Whether belongs to Physically Handicapped category or other Special Category	Yes	No		
11.	Marital Status	Married	Unmarried		
12.	Domicile of DNH/Daman/Diu	Yes	No		
13.	Educational Qualification				

Sr. No.	Qualification	Board / University	Year of Passing	Mark Obtained out of Total Marks	Percentage
1.	SSC			/	
2.	HSC			/	
3.	Graduation in _____ (Prin. Sub: _____)			/	
4.	Post-Graduation in _____ (Prin. Sub: _____)			/	
5.	Professional Qualification (B.Ed., M.Ed., other)			/	
6.				/	
7.				/	
8.				/	

14. Experience :					
Sr. No.	Name of the Organization/Department	Post held	Worked		Brief of service
			From	To	
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
15. Any other achievements with respect to the applied post:-					

Note: - Candidate should attach supporting documents (Tick \checkmark in the below boxes as applicable)

- | | |
|---|---|
| <input type="checkbox"/> Leaving Certificate | <input type="checkbox"/> SSC Mark sheet |
| <input type="checkbox"/> HSC Mark sheet | <input type="checkbox"/> Graduation Mark sheet |
| <input type="checkbox"/> Graduation Degree Certificate | <input type="checkbox"/> Post-Graduation Mark sheet |
| <input type="checkbox"/> Post-Graduation Degree Certificate | <input type="checkbox"/> Professional qualification (B.Ed., M.Ed., other) |
| <input type="checkbox"/> Degree/Diploma Certificate | <input type="checkbox"/> Mark sheet and |
| <input type="checkbox"/> Experience Certificate (if applicable) | <input type="checkbox"/> Caste Certificate (if applicable) |
| <input type="checkbox"/> Domicile (if applicable) | |

DECLARATION

I, hereby declare that, I fulfill all the conditions for the engagement to the applied post. I am also aware that the post for which I have applied is contractual in nature and does not have any right for regularization in future in any case.

I declare that, all statements made in this application form are true, complete and correct to the best of my knowledge and belief. I understand that, in the event of any information being found suppressed/false or incorrect or ineligibility being detected before or after the examination, my candidature/engagement is liable to be cancelled.

Dated:-

Place:-

SIGNATURE OF THE CANDIDATE

FOR OFFICE USE ONLY

The candidate is eligible/not eligible.

Application No.: _____

Checked by: _____

Remarks:-