

Annexure - III

**APPLICATION FOR REGISTRATION OF COLLEGE TEACHERS IN WRC  
NCTE, BHOPAL**



1. Code No. of the college 222424
2. Name of the college Krishna Shiksha D. Ed.  
Address with Telephone Nos. College Mau (Bhindar)
3. Name of the teacher Smt. Vinita Surname Name Tiwari
4. Date of Birth & Age 27-12-77
5. Educational Qualifications

Degree	Year of Passing	Division/Percentage of Marks	University	Remarks
Bachelor Degree	1999	56%	K.P. Garg	
Post Graduate Degree M.A./M.Sc.	2002	79%	Jiwaji	
B.Ed.	2007	75	-do-	
M.Ed.				
M.Phil./Ph.D.				

6. Home Address of Teacher: 309 Karori Aapet Gwalior

7. Name of Witness

Name & Address : 1. Bal Veer Singh  
Mau

Balveer  
Signature

: 2. Munari Lal  
Mau

Munari Lal  
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]  
Signature of Teacher

Recommendations of the college concerned

I hereby recommend WRC, NCTE to register Smt. Vinita Tiwari who is faculty member of our institution. I also certify the testimonials of the teachers.

[Signature]  
अध्यक्ष / सचिव

श्री कमल शिक्षा एवं बाल कल्याण  
समिति ग्वालियर (म.प्र.)

[Signature]  
Signature of Principal  
(Seal of the collage)  
कृष्णा शिक्षा एवं बाल कल्याण  
समिति ग्वालियर (म.प्र.)  
मौ, जिला-मिण्ड (म.प्र.)