



District Information System for Education (DISE)

Academic Year: 2010-11

Sarva Shiksha Mission, Bardhaman.

Block:-

Circle:-

Name of the School:-

The information in the DCF is as per the school record and correct to the best of my knowledge.

Verification by Principal/Head Master/Head Mistress

Name :-.....

Signature :-.....

Verification by: Shikshabandhu

Name :-.....

Signature :-.....

Date :-.....

Office Seal

Verification by: CPC

Name :-.....

Signature :-.....

Date :-.....

Office Seal

This is to certify that the filled in DCF has been shared with the community/VEHC/PTA

1) Signature of the Sharing Persons:

Tick for Community/VEHC/PTA
Member of Community/VEHC/PTA

2) Signature of the Sharing Persons:

Member of Community/VEHC/PTA

3) Signature of the Sharing Persons:

Member of Community/VEHC/PTA

4) Signature of the Sharing Persons:

Member of Community/VEHC/PTA

5) Signature of the Sharing Persons:

Member of Community/VEHC/PTA

6) Signature of the Sharing Persons:

Member of Community/VEHC/PTA