

PERSONAL ATTENTION  
TIME BOUND MATTER

No. EDN-H(Ele-IV)B(6)5-1/2013 (Trg)  
Directorate of Elementary Education  
Himachal Pradesh.

Dated: Shimla-171001 the, December, 2017

To

All the Deputy Director's (EE/HE)  
Himachal Pradesh.

Subject:- Identification of study centres for D.El.Ed.Course for the purpose of  
PCP Workshop, Class Room Based Activity & School Based  
Activities.

Sir/Madam,

In continuation to this Directorate letter of even number dated 23<sup>rd</sup>  
November, 2017 & 30<sup>th</sup> November, 2017 & 7<sup>th</sup> December, 2017 on the subject cited  
above.

In this context, this is to inform you that Addl. Secretary, Government  
of India, MHRD, New Delhi vide her D.O. letter No. 11-15/2017-EE.10 dated 27<sup>th</sup>  
November, 2017 has informed this office that in case of non-identification of examination  
and study centres for conduct of above mentioned online D.El.Ed. course, the teachers  
registered at NIOS Portal will not be able to give the examination and their candidature will  
become invalid.

But, it is the matter of very regret that till date only 20 Private B.Ed.  
Colleges & DIETs have been submitted their accreditation form to this office.

You are therefore, once again requested to direct all the Principals of  
Private B.Ed. Colleges (72) and 10 DIETs as mentioned in the previous letter to submit  
their accreditation form for the purpose of PCP Workshop, Class Room Based Activity &  
School Based Activities on email id [swayamdee2017@gmail.com](mailto:swayamdee2017@gmail.com) on or before 14<sup>th</sup>  
December, 2017 positively.

Please treat it most urgent.

(Manmohan Sharma, HAS)  
Director Elementary Education  
Himachal Pradesh.  
Ph.No. 0177-2657054

Endst. No. Even Dated: Shimla-171001 the, December, 2017

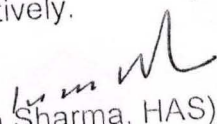
Copy to:

1. The Principal Secretary (Education) to the Government of Himachal Pradesh,  
Shimla-2 for information please.

प्रारम्भिक शिक्षा निदेशालय (द्वि.श्र.)

12 DEC 2017

2. The Director of Higher Education, Himachal Pradesh, Shimla-1 for information and with the request that copy of this letter may also be uploaded on your Departmental Website and all the Principals of Private B.Ed. Colleges may please be directed to submitted their accreditation form for the creation of study centres for D.El.Ed. Course to this office on or before 18<sup>th</sup> December, 2017 positively.
3. Guard file.

  
(Manmohan Sharma, HAS)  
Director Elementary Education  
Himachal Pradesh.  
Ph.No. 0177-2657054

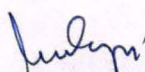
Directorate of Higher Education  
Himachal Pradesh

(College Branch)

Endst.No. EDN-H (8)A(1) PDC-Misc./2015- Dated: Shimla December, 2017.

Copy for information and further necessary to:-

1. All the Principals of B.Ed. Colleges running in Private Sector in HP with the direction to submit the accreditation form for the creation of study centres for D.El.Ed. Course to the Director of Elementary Education, HP Shimla-01 on or before 18<sup>th</sup> December, 2017 positively through email ID i.e. [swayamdee2017@gmail.com](mailto:swayamdee2017@gmail.com).
2. All the Dy. Directors of Higher Education, HP for similar action, please.
3. The Registrar, H. P. University, Summer Hill, Shimla-171005.
4. Guard File.

  
Jt. Director of Higher Education  
Himachal Pradesh.



National Institute of Open Schooling

(An Autonomous Institution under MHRD, Govt. of India)

A-24/25, Institutional Area, Sector-62, Gautam Budh Nagar, NOIDA-201309

Application Form for Accreditation of Study Centres for D.El.Ed. Programme

1. Name of the Institution/School \_\_\_\_\_ :
2. Complete Address \_\_\_\_\_  
District: \_\_\_\_\_ State: \_\_\_\_\_ PIN: \_\_\_\_\_
3. Telephone Number: \_\_\_\_\_ 4. Email ID : \_\_\_\_\_
4. Name of the Principal/Head of Institution(as coordinator) :  
Contact numbers: (Phone) \_\_\_\_\_ (Mobile) \_\_\_\_\_ (Email) \_\_\_\_\_
5. Name of the Person nominated to be the Asstt. Co-ordinator:  
(Must be Senior Functionary of the Institution)  
Contact numbers: (Phone) \_\_\_\_\_ (Mobile) \_\_\_\_\_ (Email) \_\_\_\_\_
6. Type of Institution  DiET  SCERT  BIET  Sr. Sec  TEI (Pl. Tick)
7. Number of Classrooms \_\_\_\_\_ 10. Number of Halls \_\_\_\_\_
11. Number of faculty who are Post Graduate with B.Ed./D.Ed./D. El. Ed. or equivalent  
(Please enclose list with details)
12. Number of Mentors: \_\_\_\_\_, Supervisors: \_\_\_\_\_ (Please enclose list with details)
13. Number of Computers \_\_\_\_\_
14. Whether internet facility is available  Yes  No
15. Whether Stand by Power Supply is available  Yes  No
16. \_\_\_\_\_  
for NIOS office Yes No  ere sepa  room
17. Is there any locker/secured room for secrecy work & materials  
Like storing of Question Papers, etc.  Yes  No
18. Is there a separate toilet for Females  Yes  No

I hereby give my consent to become NIOS Study Centre for D.El.Ed. Programme

Signature of the Principal/Head/Coordinator

Date:

Seal:

Recommended and Forwarded by

State Nodal Officer (SPD/SSA/SCERT) for Training of In-service Untrained Elementary School Teachers

Date:

Signature with Official Seal

List of the Faculty (Resource Persons) attached to the Study Centre \_\_\_\_\_

S.No.	Name of the Faculty (Resource Person)	Qualification		Teaching Experience (in years)
		Educational	Professional	
1.	2.	3.	4.	5.
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				