

### केन्द्रीय विद्यालय संगठन

#### KENDRIYA VIDYALAYA SANGATHAN

18 संस्थागत क्षेत्र, शहीद जीत सिंह मार्ग नई दिल्ली 110 016

18, Institutional Area, Shaheed Jeet Singh Marg New Delhi 110 016

Fax: 26514179 फोन TEL: 26858570 website:www.kvsangathan.nic.in

Dated: #7 -05-2013

MOST URGENT/TIME BOUND.

The Deputy Commissioner Kendriya Vidyalaya Sangathan All Regional Offices.

F.11083-1/2013-KVS HQ (Admn.-I)

Speed-Post/E-Mail

Sub:Subscription of membership towards KEVINTSA/AIKVTA -regarding.

Sir/Madam,

I am to refer to the subject noted above and to say that in terms of item No. 5 of Annexure-A of Appendix XLII(A) of Education Code the annual subscription towards membership of association is to be deducted in favour of a particular association by the DDO onces in a year in the month of July.

You are, therefore, requested to authorize the Principals under your jurisdiction to deduct the annual subscription towards KEVINTSA/AIKVTA from the Pay Bill of July, 2013 subject to fulfillment of conditions as laid down in Appendix XLII(A) of Education Code for Kendriya Vidyalayas.

You are requested to send the compiled record of membership of the associations in the prescribed proforma (A & B) enclosed herewith to this office latest by 14.08.2013 through E-mail followed by hard copy positively so that further appropriate action may be taken.

It has been brought to the notice of KVS, by said association that some of the regional offices did not passon the instructions in time causing inconviniace to pricincipals taking action in time. Hence these instruction, may be followed strictly.

Yours faithfully

(Dr. E.Prabhakar) Joint Commissioner (Pers.)

Copy to:

- The President/General Secretary, KEVINTSA/AIKVTA for information. 1.
- The Asstt. Commissioner(Esstt./Finance) KVS (Hq.) for similar action. 2.
- The Director, all ZIETs, KVS for similar action. 3.

4. √The Asstt. Commissioner(EDP) KVS (Hq.) for uploading on the web site of KVS.

Joint Commissioner (Pers.)

## Proforma-A Name of the Regional Office\_

teaching staff in the Region as	teaching staff in position in the Region as on	No. of teaching staff subscribed for AIKVTA	Total amount subscribed by the teaching staff on account of membership subscription towards AIKVTA
11	2	3	4

#### **Certificate**

Certified that the above information is checked carefully by the undersigned

Signature_	
Deputy Cor KVS, RO	mmissioner,
Date:	

# Proforma-B Name of the Regional Office\_\_\_\_\_

teaching staff in the Region as	teaching staff in position in the Region as on	No. of teaching staff subscribed for KEVINTSA	
1	2	3	4

### <u>Certificate</u>

Certified that the above information is checked carefully by the undersigned

Signature
Deputy Commissioner,
Date: