

**Performa (Jan-2023 to Mar-2023)**  
**Monthly Attendance Report of the contractual IT Faculty of HP Senior Secondary Schools**  
**For the Month \_\_\_\_\_, Year \_\_\_\_\_**  
**(Please fill in Block Letters Only)**

Name of the School:	
District:	
Principal Name:	Mobile No. (Principal):
E-Mail ID (School):	Phone No. (School):

**Detailed Attendance Sheet for the Month \_\_\_\_\_, Year \_\_\_\_\_**

**Notations must** be used as **P**-Present, **L**-Casual Leave with Pay, **A**-Absent/Leave without Pay, **H**-Holiday, **S**-Sunday, **ML**-Medical Leave

Name of Faculty1																																
Emp. Code	H														Mobile1																	
Designation														Mobile2																		
Email ID																											(Sign. of Faculty 1)					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		

**Total Present:** \_\_\_\_\_ **Casual Leave:** \_\_\_\_\_ **Absent:** \_\_\_\_\_ **Medical Leave:** \_\_\_\_\_

**Remarks if Any:** \_\_\_\_\_

Name of Faculty2																																
Emp. Code	H														Mobile1																	
Designation														Mobile2																		
Email ID																											(Sign. of Faculty 2)					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		

**Total Present:** \_\_\_\_\_ **Casual Leave:** \_\_\_\_\_ **Absent:** \_\_\_\_\_ **Medical Leave:** \_\_\_\_\_

**Remarks if Any:** \_\_\_\_\_

Enrolment of IT Students				
	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>
No. of Students				
Class taken by (Faculty Name)				

Fee Deposited Details of previous month		
Amount (In Rs.)	Month, Year	Date of fee deposit

**Date:** \_\_\_\_\_

**(Signature of Principal/Officer In-charge with Seal)**

**Note:**

- Faculty who has resigned/left job during the month: Name: \_\_\_\_\_ Emp. code: \_\_\_\_\_  
 Date of Resignation: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_. (Please send resignation letter in original to NIELIT Shimla)
- The faculty is allowed only 1 CL (Casual Leave) in a month and CL is cumulative till contract agreement of faculty. In case of new agreement with faculty, CL will be accumulated from fresh. Concern Principal is requested to maintain leave record of faculties and verify before certifying the attendance of faculties.
- The faculty is allowed 6 medical leave (w.e.f. 01-Jan-2023 onwards) in one calendar year with medical certificate duly signed by Principal/Officer in-charge of the school. Number of leaves can be availed only in proportionate to validity of contract agreement.
- Kindly fill all the columns of the forms as it is mandatory and make sure that the attendance reaches at NIELIT Shimla, Cedarwood Building, Jakhoo Road, Shimla-171001 or in Email ID ([shimla@nielit.gov.in](mailto:shimla@nielit.gov.in)) by email of principal latest by 2<sup>nd</sup> day of the following month.
- File name of the attendance must be in the format of H-YYYYMM-EmpID. For example if your Emp-id is H-115215 then file name for Jan 2023 attendance should be **H-202301-115215**.
- The subject of the Email should also be as **"Attendance H-202301-115215"**
- The scanned attendance must be visible properly.**