



BOARD OF INTERMEDIATE & SECONDARY EDUCATION ABBOTTABAD

BIO-DATA FORM

MARKING REGISTRE PAGE # _____ MARKING CENTRE: ATD / HR/ MAN: _____

SUBJECT _____ CLASS: SSC /HSSC _____ PART: _____ Year _____ Annual / Supply.

Certified that none of my nearest relatives (i.e. son, daughter, brother, sister, husband, wife, father, mother) is appearing in the subject examination

Sr #	Status	Qualification	Name	Designation	Institution	CNIC	Contact#	Bank Account#	BANK ABL/ NBP/_	Bank Branch Code	Questions Allotted	Signature
1	H.E											
2	Sub.E											
3												
4												
5												
6												

Certificate: I, Mr. _____ have been appointed as Head Examiner by the Controller of Examinations BISE Abbottabad in the subject of _____. I have gone through the contents of instructions provided to me by the Board in c/w centralized marking. It is also certified that the sub examiners, whose names are mentioned in this Proforma from Sr No: 1 to 7 are appointed by me after evaluation of their academic qualification and experience. Moreover, it is sure that they are teaching _____ as a subject in their respective institutions at SSC/HSSC level.

Note: The Bio-Data form must be submitted prior to start of Making along with Teaching/ Experience Certificates in r/o Sub-Examiners to the concerned co-ordinator.

Signature of H E: _____

BOARD OF INTERMEDIATE & SECONDARY EDUCATION ABBOTTABAD

MARKING BILL



MARKING REGISTER PAGE # _____ MARKING CENTRE: ATD / HR/ MAN: _____

SUBJECT _____ CLASS: SSC /HSSC _____ PART: _____ Year _____ Annual / Supply.

Sr. No:	Name, Designation Institution	CNIC NO	Contact#	Bank Account#	Bank Name ABL/ NBP/	Bank Branch Code	Worked as HE/SE/Checker	No of Scripts Marked	(per script)	Amount for Marking	H.E Fee & Supervision Allowance	Signature	Total Amount	For Office Use Only	
														Deduction for Mistakes	Net Amount Payable
1							H.E								
2							S.E								
3															
4															
5															
6															

Space for Audit:

Audited for Rs. _____

In words. _____

Asstt: _____ Supdt: _____ Audit Officer

Audit _____ Audit _____ BISE, Atd

Co-ordinator

A.C (Secrecy)

C.E

Chairman

Signature of H.E

MARKING RATES

SSC

RATE PER SCRIPT	UPTO 50 Marks=Rs.14
	UPTO 75 Marks=Rs.16
	UPTO 100 Marks=Rs.18
HEAD EXAMINER FEE	TOTAL SCRIPT(-) PERSONAL SCRIPTS OF HEAD EXAMINER×7.5÷100×MARKING RATE
SUPERVISION ALLOWANCE OF HEAD EXAMINER	Rs. 48/- (PER SUB EXAMINER)
CHECKER	RS.2/- (PER SCRIPT)

HSSC

RATE PER SCRIPT	UPTO 50 Marks=Rs.16
	UPTO 75 Marks=Rs.18
	UPTO 100 Marks=Rs.20
HEAD EXAMINER FEE	TOTAL SCRIPT(-) PERSONAL SCRIPTS OF HEAD EXAMINER×7.5÷100×MARKING RATE
SUPERVISION ALLOWANCE OF HEAD EXAMINER	Rs. 48/- (PER SUB EXAMINER)
CHECKER	RS.2/- (PER SCRIPT)

نوٹ: بانیو ڈیٹا فارم / مارکنگ بل جس میں بینک اکاؤنٹ کی تفصیل درج کی ہے اسکا اندراج بورڈ ویب سائٹ پر بھی کریں تاکہ آپ کی ڈیوٹی کا معاوضہ بروقت بینک میں ٹرانسفر ہو سکے۔