



WEST BENGAL COUNCIL OF HIGHER SECONDARY EDUCATION
VIDYASAGAR BHAVAN
9/2, BLOCK-DJ, SECTOR-II, SALT LAKE
KOLKATA-700091

No. L/PR/27/2020

Date : 25/02/2020

From : -
Dr. Mahua Das
President
W.B. Council of H.S. Education

To
Venue Supervisor

TO ALL VENUE SUPERVISORS
Confidential & Urgent

Dear Sir,

Please accept my heartfelt gratitude and thanks for your dedicated service towards a safe and secured examination during the preceding years in your venue, in the capacity of Venue Supervisor.

This year too the undersigned seeks your valued co-operation and support to ensure a very peaceful Higher Secondary Examination – 2020. The Council has taken some security measures, in this respect to empower your authority to act more successfully to restrict the Mobile Phones or any other so called unwanted incident, you feel you should duly report to the Council (Complaint Format enclosed).

SECURITY MEASURES :

- A. An Examination Security format to be used when you see the restriction regarding usage of your school Cell Phones is being fringed by any staff or any other person concerned inside the venue, during Examination hours.
- B. As per rule students not to be allowed to leave the Exam (Hall) for toilet purpose with in 1 (One) hr. (up to 11 a.m.) to be instructed to all invigilators.
- C. Mobile phone checking is to be carried out at the main gate of the venues by the Council nominees with the devices given by the Council before the examination. If necessary the checking can also be carried out in the examination hall toilets before the official starting of the examination.



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SPECIMEN OF FORMAT – A

- a) It has been noted that the following person(s)/ designation, has/have been using the cell Phones inside the Examination venue during Examination Hours despite of repeated warnings.

Person(s) / Designation

- i) _____
ii) _____
iii) _____
iv) _____

- b) An untoward incident which has taken place in the school being reported for necessary action. Nature of incident stated below :

Date & Time : _____ Signature of the Venue Supervisor _____

Name of Venue Supervisor : _____ Ph. No. _____

School Name with Code _____

Note : (This format will be used by the venue supervisor only against staff/concerned persons of the school violating the Rules of the Council during the period 12/03/2020 to 27/03/2020)

Detailed Report to be mailed to – E-mail ID : dsexamination@wbchse.org.in

Mahua Das

Dr. Mahua Das
President
W.B. Council of H.S. Education

Format for Venue Supervisor (Data Sheet)

TO BE USED FOR SENDING H.S. EXAMINATION, 2020 QUESTION PAPERS FROM THE DESK OF THE VENUE SUPERVISOR TO THE INVIGILATORS OF RESPECTIVE EXAMINATION ROOM / HALL.

CENTRE :

EXAMINATION DATE :

VENUE CODE :

VENUE NAME :

EXAMINATION ROOM / HALL NO.	NAME OF THE INVIGILATOR	NAME OF THE CHIEF INVIGILATOR	QUESTION PAPERS DISTRIBUTED TO EXAM. ROOM / HALL :		SIGNATURE OF THE CHIEF INVIGILATOR WITH DATE & MOBILE NO.
			NAME OF THE SUBJECTS WITH NO. OF COPIES OF Q.P.	SERIAL NO. OF THE ENVELOPE(S)	

N.B. : INVIGILATORS ARE INSTRUCTED TO OPEN THE ENVELOPE AT EXAM. ROOM / HALL ONLY AND NOT BEFORE 10.00 A.M.

* The list of day to day records may be preserved by the Venue Supervisor for future reference, if any.

FROM : WEST BENGAL COUNCIL OF HIGHER SECONDARY EDUCATION
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Signature of the Venue Supervisor