1.	School Code	:	
2.	Name of School	:	
3.	School Address	:	
4.	Phone No.	:	
5.	Educational District	:	
6.	Name of SITC	:	
7.	Mobile No. of SITC	:	
8.	E-mail address of SITC	:	
9.	Date of joining as SITC in the present school	••	
10.	Period (duration) as SITC in the present school	:	
11.	Whether IT activities are being implemented in the school properly?	:	
12.	Whether the school has participated in the sub district/district/State level IT competitions and achievements received, if any?	:	
13.	Whether all the teachers in the school have received internet training in the leadership of SITC?	:	
14.	Whether the IT Audit has been conducted in your school?	:	
15.	Details of IT enabled activities in the school (use additional sheet if needed)	:	

Remarks about the performance of SITC:

Certified that the a	ibove details a	are true and	correct to	the best of	f my knowledge.

Place :	
Date :	Signature of Headmaster/Headmistress