

TEACHERS SERVICE COMMISSION

Telephone: Nairobi
2892000/
0722-208-552
Email: info@tsc.go.ke
Web: www.tsc.go.ke



TSC HOUSE
KILIMANJARO ROAD
UPPER HILL
PRIVATE BAG- 00100
NAIROBI, KENYA

When replying please
quote

Date:

Ref. N^o: TSC/.....

Name,

TSC/.....

P.O. Box,

.....

OFFER OF INTERNSHIP

1. I am pleased to inform you that your application for internship with the Teachers Service Commission as **Secondary School Teacher Intern** has been successful.
2. Subject to your acceptance of the terms of this offer, you are to report to the **Principal**, ...
Secondary School, ... **County** to teach
..... and
3. Your **TSC/No.** is In all your correspondence with the Commission, you should quote your full name and **TSC** number.
4. The internship will be a one-off non-renewable programme for a duration of Twelve **(12)** months with effect from **4th January, 2021** to **31st December, 2021**.
5. The date you report for duty will be the effective date of your Internship, but not later than one week after **4th January, 2021**.
6. The Internship shall be a non-remunerative engagement. However, you will receive a monthly stipend of Kenya Shillings Twenty Thousand **(KSh. 20,000/=)** only, all inclusive.

7. You will be expected to adhere to the following mandatory conditions on Internship: -
 - (i) Execute the internship Agreement.
 - (ii) Comply with the Teachers service Commission Code of Conduct and Ethics for Teachers and other policies of the Commission as well as relevant administrative policies and Circulars from time to time.
 - (iii) Undertake performance evaluation as prescribed by the Code of Regulations for Teachers;
 - (iv) Observe confidentiality of information and security of documents, tools and equipment that are placed in their possession in the course of the programme;
 - (v) Provide feedback on Internship experience to the Head of Institution;
 - (vi) Clear with the Head of Institution before leaving the Internship station.
8. You will be required to have a Personal Accident Insurance to cover for personal risks during the internship period. You will also be required to register with the National Hospital Insurance Fund (NHIF) or other reputable medical insurance firm.
9. The Commission will issue a Certificate of Completion of Internship upon successful completion of the programme.
10. You may terminate this contract by submitting a written letter of resignation/termination of the contract to the Commission through your Head of Institution by giving thirty **(30)** days written Notice.
11. The Commission reserves the right to terminate the contract with an intern at any point during the internship period subject to due process.

.....
**TSC COUNTY DIRECTOR,
NYAMIRA COUNTY.**

**FOR: SECRETARY/CHIEF EXECUTIVE
TEACHERS SERVICE COMMISSION**

Copy to:

The TSC Regional Director,
Nyanza Region

TSC Sub-County Director,
Masaba North Sub-County

The Principal

....., School *(Please inform TSC when the
teacher started teaching)*