KENDRIYA VIDYALAYA BSF TEKANPUR, GWALIOR

FORM NO:

APPLICATION FORM FOR APP	OINTMENT OF PGT/TGT/PRT/COMPUTE	R INSTRUCTOR/SPOKEN ENGLISH TEACHER/
in the state of th	CININELIT OF FOI/ IGI/FKI/COMPUTE	R INGIRUCIUR/SPUREN ENGLISH TEACHER.

YOGA INSTRUCTOR/DOCTOR/NURSE/COUNSELOR/SPECIAL EDUCATOR ON CONTRACT BASIS.

(2023-24)

Important notes: 1. All entries should be made in capital letters

2. One form should be used for one post.

3. Enclose attested copies of testimonials with each form. (If applied for more than one post)

1.	(Please in Yoga Instr	uctor/Spoke	D FOR her PGT/TGT/ en English Tea lor in the box)	PRT/Comput acher/Special	er Instructor/ Educator/			SUBJEC (In case of			OR	
]		->		-		
2. Car	ndidate's Name (in	n capital lett	ers) (Please ke	ep one box bl	ank between Fi	rst name, N	1iddle nan	ne & Last nar	me)			
	her's /Husband's ease keep one box			, middle name	Father & Last name)		Husba	nd			T	
4. Dat	e of Birth:	DAY		MONTH		/EAR		5. Gen (Please T		Μ] [F
6. Age	e as on 31.03.202	3	Yea	ır	Month		Days					
							· · ·		Pleas	e affix	one	recent
7. Can	ididate Address (ii	n capitals let	ters)						Photo	ograph <u>witho</u>	ut attest	tation
Fa	ame ather/Husband's N ddress	: lame: :		-								
	ty/Town ŋ/Mobile No.	: : 1.		PIN					l			
		2.							Si	agnature of	Candid	late

8. Academic Qualification (Starting from High School level)

(Please give information as applicable. (Attach attested copies of Mark sheets and Certificates)

Name of Examination	Write name		AGGREGATE MARKS				Duration	
(with complete name of course passed)	of Examination passed	Year of passing	Max. Marks	Marks obtained	%age of marks	Subjects / Specialization	of course (in months)	Board/ University
High School (Class X)								
Intermediate (Class XII)								
Graduation (Name of Course)								
Post Graduation (Name of Course)								
Others if any (Specify)								

FORM NO:

9. Professional Qualification (Attach attested copies of mark sheets & certificates)

Name of Examination		Write name		AGGREGRATE MARKS				Duration	
(with complete name of course passed)		of Examination passed	Year of passing	Max. Marks	Marks obtained	%age of marks	Subjects /Specialization	of course (in months)	Board/ University
	F/D.ED/ specify)								
	Theory					en entre en transference			
B.ED	Practical								
Degree	B.Tech(CS)/ MBBS e/Diploma in Nursing								
	her if any specify)								

10. Experience (Attach separate sheet, if columns are insufficient)

		Period of service		No. of	Class		
Post held	Name of Institution	From	То	completed years & months	Class taught	Subjects taught	

11. Are you able to teach through English and Hindi, both? (Please mark ($\sqrt{}$) tick in the appropriate box) For teaching posts

YES	NO	,
YES	 NO	

12. Do you have knowledge of computer application?
(Please mark (√) tick in the appropriate box) For teaching posts

UNDERTAKING

I hereby certify that all the information given above is true and correct to the best of my knowledge. I have attached attested copies of my testimonials in support of the entries made above. I also agree that mere eligibility does not confer right to be called for interview/selection. My candidature may be cancelled in case any information is found to be incorrect on verification.

Place

Date

Signature____

Name_

Contact No.__

Documents Verified by	:	
Teacher's Name	:	
Designation	:	