PM SHRI KENDRIYA VIDYALAYA NO 1 BALASORE APPLICATION FORM FOR PART TIME CONTRACTUAL TEACHERS & VOCATIONAL EXPERTS

Important Notes:

- (i) All entries should be made in capital letters only.
- (ii) One form should be used for one post.
- (iii) Enclose self attested copies of testimonials with each form. (if applied for more than one post)

Paste recent passport size photograph

1	Post Applied For			
	(Please Specify):			
2	Candidate's Name:			
3	Father's / Husband's Name			£.
4	Date of Birth			
5	Gender (Male/Female)			
6	Age (As on 31 st March of this year)	Year	Month	Days
7	Candidates Address (In Capital Letters)			
8	City/Town & PIN			
9	Mobile / Landline Number			
10	WhatsApp Number			
11	Email address			

8. Academic Qualification (Stating from High school Level)

Name of Examination	Year of Passing	A	GGREGA MARKS	TE	Subjects/ Specialization	Duration of course (in	Board / University
2	hes	Max. Marks	Marks Obtained	% of marks	लग सं	Months)	a a
High School (Class X)	1 . 34			e.11	01-1-01		
Intermediate							
(Class XII)							
Graduation							
Post- Graduation							

<u>9. Prote</u> ssior	nal Qualificat	tions:								
Name of Exam complete nam Passed)	ination (With	Board / University	Year Pass		Max. marks	Marks Obtained	% of marks		ects/ cialization	Duration of course (in months)
, 										(III IIIOIILIIS)
JBT/B.E.Ed./DI in Nursery Tea										
(min 2years)										
(Specify)										
B.Ed.										
B.E. / B.Tech.(CS)									
Degree/Diplor Nursing/O Lev										
OTHERS IF any	(Specify)									
			- 4							
10. Whether	C.T.E.T. / Ar	ny other e	quiv	/alent	exami	nation q	ualified?	? YE	S() N	10 ()
If <mark>Yes atta</mark>	ach certificate.								. ,	
	Scored					Scored				
	- Primary Stage				(6 to 8	– Element	ary Stage)			
Post Held	Experience (Whether		Period	of Servi	ice No o	completed	l Su	bject and	Salary per
rost field	Institution	Recognized				Years	Years and		Class taught	Month
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12. Are you a	able to teach √) Please mark		_					()	NO ()
13 Do vou ha	ave knowledg							<i>(</i>)	NO ()
13.00 you no	Please mark (√							` '	(,
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	bove. I also agre	_								
candidature ma	y be cancelled i	n case any ir	nform	ation is	found t	o be incori	ect on ver	ificati	on.	
Place:					S	Signature:_				
Place: Date:						Signature:_ Name:				