

# PM SHRI KENDRIYA VIDYALAYA KARIMNAGAR

## SESSION 2026-27

### APPLICATION FORM

S.no.....

Post applied for ..... Subject .....

1. Name (In Capital Letters).....

Fathers' Name (In Capital Letters).....

2. Date of Birth (DD/MM/YYYY).....

3. Category (SC/ST/OBC/Gen.)..... Gender (Male/Female/Third Gender).....

4. Contact Address.....

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City..... District..... State.....

5. Phone No with STD Code.....

6. Mobile No..... Alternate Mobile No.....

7. Email Id.....

#### 8. Educational Qualification:

S.No	Name of the Exam	Name of Board/ University	Year of Passing	Percentage	Subjects
1					
2					
3					
4					
5					
6					

#### 9. Professional Qualification: (D.Ed/B.Ed./B.PEd/MCA/PGDCA/CTET etc)

S.No.	Name of the Exam	Name of Board/ University	Year of Passing	Percentage	Subjects
1					
2					
3					

Paste your recent photograph here

10. NET/SLET/TET/CTET.....

11. Any Extra Achievement.....

12. Experience: (If Any)

S. No.	Name of The Organization	Subject Taught	Duration in Months	Period		Salary Drawn	Remark
				From	To		
1							
2							
3							
4							
5							

**Note:**

1. Appointment will be purely on Part time/ Contractual basis for the session 2024-25.

**Declaration:**

This is to certify that the above information is correct and best to my knowledge.

Place:.....

Signature of the Candidate .....

Date:.....

Name of the Candidate.....

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Official Use Only

Verified By:

1. Name ..... Designation..... Signature.....

2. Name ..... Designation..... Signature.....

Remark (If Any).....

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