

PM SHRI KENDRIYA VIDYALAYA ONGOLE





APPLICATION FORM FOR CONTRACTUAL STAFF 2025-26

POST & SUBEC	T APPLIE	<u>D FOR</u> :	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •		Affix a recent
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l. Name (Mi	Name (Mr/Mrs/Ms) :							Passport size
2. Father's/I	Father's/Husband's name:							
	Date of birth :							
	Category : Gen/SC/ST/OBC/Others							
	or correspo							
	l address in							
6. Contact N	los. (Mobile	(Mobile) :12:						
7. E-mail								
8. Education							nly essent	ial for the post)
Name of Exam		Subjects fered	Duration (In month)	Year of Passing	MM	MARKS MO	% age	Name of Board/ University.
Sr Secondary (XI	I)				IVIIVI	IVIO	70 age	
1st year (BA/B Sc)								
2 nd year (BA/ B Sc)								
3 rd year (BA/ B Sc)								
BA/B Sc								
P.G.(MA/ M.Sc etc)							
Other if any (Speci	fy)							
Professional	Qualificati	ons: (Pleas	e enclose cop		ficates, onl	y essentia MARKS	l for the	
Name of Exam	Subje	ct Offered	Duration (In month)	Year of Passing	MM	MO	% age	Name of Board/ University.
B.El.Ed/D Ed (2 Years course)								
B.Ed./B.P.Ed								
CTET / APTET	Paper I/	Paper II						
Other if any (Speci	fy)							
10. Compute	r knowledge		: YES	/ NO				
·	rite the cour	•	·					
11. Experienc	e ii any: En	close copy	of the certific	ates				
Post Held	ost Held Name of Institution		Classes and Subject(s) taught		Period of Service From To			No. of Completed years & months
	1							
I hereby certify to the best of m			•	en by me i	n this appli	cation is t	rue, comp	olete and correct
		c and benef	••					
PLACE: DATE:					N	(Signat NAME:	ture of the	candidate)