

# PM SHRI KENDRIYA VIDYALAYA NO. 2, BHOPAL

APPLICATION FORM FOR PART TIME CONTRACTUAL TEACHERS/ INSTRUCTORS/COACHES EXPERTS/DOCTOR/NURSE/ ETC.  
Session – 2026-27

**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

|  |   |  |
|--|---|--|
| 1. <b>POST APPLIED FOR</b>   | SUBJECT APPLIED FOR<br>(In case of PGT/TGT) |  |
| →  |   |  |
| <b>2. Candidate's Name (in capital letters)</b> (Please keep one box blank between First name, Middle name & Last name)        |   |  |
|  |   |  |
| <b>3. Father's/Husband's Name (in capital letters)</b> (Please keep one box blank between First name, Middle name & Last name) |   |  |
|  |   |  |
| <b>4. Mobile Number (Mandatory)</b>  |   |  |
|  |   |  |
| <b>5. Email Id (Mandatory)</b>   |   |  |
|  |   |  |
| <b>6. Date of Birth:</b>   |   |  |
| DAY  | MONTH                                       | YEAR   |
|  |   | 7. Gender<br>(Please Tick)   |
| M  |   | F  |
| <b>8. Age as on 31.03.2026</b>   |   |  |
| Year   | Month                                       | Days   |
| <b>9. Candidate Address (in</b>  |   | <b>Please affix one recent<br/>coloured<br/>Photograph without attestation</b> |
| Name :<br>Father/Husband's Name :<br>Address :   |   |  |
| City/Town :<br>Ph/Mobile No. :   |   | PIN  |

Signature of Candidate ↑

**10. Academic Qualification (Starting from High School level)**

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

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

**Note:** - Please provide information for the qualification completed on the date of Interview

**11. Professional Qualification (Attach self attested copies of mark sheets & certificates)**

| Name of Examination<br>(with complete name of course passed) | Write name of Examination passed | Year of passing | AGGREGATE MARKS |                |               | Subjects /Specialization | Duration of course (in months) | Board/ University |
|--|----------------------------------|-----------------|-----------------|----------------|---------------|--------------------------|--------------------------------|-------------------|
|  |                                  |                 | Max. Marks      | Marks obtained | %age of marks |                          |                                |                   |
| CTET (I to V) Qualified                                      |                                  |                 |                 |                |               |                          |                                |                   |
| CTET (VI to VIII) Qualified                                  |                                  |                 |                 |                |               |                          |                                |                   |
| B.ED   | Theory                           |                 |                 |                |               |                          |                                |                   |
|  | Practical                        |                 |                 |                |               |                          |                                |                   |
| MBBS Degree /Diploma in Nursing / Counseling/Yoga            |                                  |                 |                 |                |               |                          |                                |                   |
| Other if any (specify)                                       |                                  |                 |                 |                |               |                          |                                |                   |

**12. Experience (Attach self attested copies of certificates if experience is in the recognized Schools).**

| Post held | Name of Institution | Period of service |    | No. of completed years & months | Class taught | Subjects taught | Scale of pay and salary per month |
|-----------|---------------------|-------------------|----|---------------------------------|--------------|-----------------|-----------------------------------|
|           |                     | From              | To |                                 |              |                 |                                   |
|           |                     |                   |    |                                 |              |                 |                                   |
|           |                     |                   |    |                                 |              |                 |                                   |
|           |                     |                   |    |                                 |              |                 |                                   |
|           |                     |                   |    |                                 |              |                 |                                   |

**13. Are you able to teach through English and Hindi, both?**  
(Please mark (✓) tick in the appropriate box) For teaching posts

YES

NO

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

YES

NO

**15. Are you a family member of KVS Regular Employees (Please mark (✓) tick in the appropriate box)**

|                              |                             |
|------------------------------|-----------------------------|
| <input type="checkbox"/> YES | <input type="checkbox"/> NO |
|------------------------------|-----------------------------|

**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 \_\_\_\_\_

Contact No. \_\_\_\_\_

Name \_\_\_\_\_