



**9. Professional Qualification (Attach attested copies of mark sheets & 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<br>months) | Board/<br>University |
|-----------------------------------------------------------------|-------------------------------------------|--------------------|-----------------|-------------------|------------------|-----------------------------|-----------------------------------------|----------------------|
|                                                                 |                                           |                    | Max.<br>Marks   | Marks<br>obtained | %age of<br>marks |                             |                                         |                      |
| CTET (I to V)<br>Qualified                                      |                                           |                    |                 |                   |                  |                             |                                         |                      |
| CTET (VI to VIII)<br>Qualified                                  |                                           |                    |                 |                   |                  |                             |                                         |                      |
| B.ED                                                            | Theory                                    |                    |                 |                   |                  |                             |                                         |                      |
|                                                                 | Practical                                 |                    |                 |                   |                  |                             |                                         |                      |
| MBBS Degree<br>/Diploma in Nursing<br>/ Counseling/Yoga         |                                           |                    |                 |                   |                  |                             |                                         |                      |
| Other if any<br>(specify)                                       |                                           |                    |                 |                   |                  |                             |                                         |                      |

**10. Experience (Attach certificates if experience is in the recognized Schools) – priority will be given.**

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

**11. Are you able to teach through English and Hindi, both?**

(Please mark (√) tick in the appropriate box) For teaching posts

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

**12. Do you have knowledge of computer application?**

(Please mark (√) tick in the appropriate box) For teaching posts

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

**13. Are you a family member of KVS Employees (Please mark (√) tick in the appropriate box)**

|     |                          |    |                          |
|-----|--------------------------|----|--------------------------|
| Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
|-----|--------------------------|----|--------------------------|

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