



PM SHRI KENDRIYA VIDYALAYA BARAN

APPLICATION FORM FOR APPOINTMENT OF TEACHERS ON CONTRACT BASIS



- Important notes:**
- All entries should be made in capital letters
 - One form should be used for one post.
 - Enclose attested copies of testimonials with each form. (If applied for more than one post)

Session: 2025-26

1. POST APPLIED FOR (Please indicate whether PGT/TGT/PRT in the box)	SUBJECT APPLIED FOR (In case of PGT/TGT)

2. Candidate's Name (in capital letters) (Please keep one box blank between First name, Middle name & Last name)

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3. Father's /Husband's Name (in capital letters)

Father Husband

(Please keep one box blank between First name, middle name & Last name)

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4. Occupation of Spouse with Address (if applicable)

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5. DOB:

DAY		MONTH	

5. Gender (Please Tick)

M <input type="checkbox"/>	F <input type="checkbox"/>
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6. Age as on 31.03.2025

Year <input type="checkbox"/>	Month <input type="checkbox"/>	Days <input type="checkbox"/>
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7. Candidate Address (in capitals letters)

Name :
Father/Husband's Name:
Address :

City/Town :

PIN :
Ph./Mobile No. : 1.
2.

Please affix one recent
Photograph
without attestation

Signature of Candidate

8. Academic Qualification (Starting from High School level)
(Please give information as applicable. (Attach attested copies of Mark sheets and Certificates))

Name of Examination (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			
High School (Class X)								
Intermediate (Class XII)								
Graduation (Name of Course)								
Post-Graduation (Name of Course)								
Others if any (Specify)								

9. Professional Qualification (Attach attested copies of mark sheets & certificates)

Name of Examination (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			
D. Ed./B. El. Ed.								
B. ED								
BE/B. Tech (CS)/ MBBS Degree/Diploma in Nursing								
Other if any (specify)								

10. Experience (Attach separate sheet, if columns are insufficient)

Post held	Name of Institution	Period of service		No. of completed years & months	Class taught

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"/>
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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"/>
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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: _____

Contact No.: _____

Signature _____

Name _____