

PM SHRI KENDRIYA VIDYALAYA No. 1 O.F. ITARSI

SESSION 2025-26

(kindly fill this form in four copies)

Reg. No

POST APPLIED FOR :- _____
NAME :- _____
FATHER'S / HUSBAND'S NAME :- _____
DATE OF BIRTH :- _____
ADDRESS: _____

TELEPHONE / MOBILE NO. :- _____
E.MAIL. ID :- _____
PAN NO. :- _____
CATEGORY SC/ST/OBC/GEN :- _____

EDUCATIONAL QUALIFICATION

S.N O	EXAM PASSED	YEAR	MARKS IN %	SUBJECTS	BOARD/UNIV
1	12 th				
2	BA/B.Com/B.Sc				
3	MA/M.Comm/ M.Sc				
4	B.Ed				
5	M.Ed				
6	JBT/D.ED/D.ELD Etc				
7	Professional/CTET				

Achievement in Academic's and Co-Curricular Activities

Activities/Games/NCC/Scouts _____

PROFESSIONAL EXPERIENCE

S.NO	NAME OF INSTITUTION	POST HELD	PERIOD		DURATION	SUBJECT & CLASS TAUGHT
			FROM	TO		
1						
2						
3						
4						
5						

MY SUITABILITY TO THE POST: (50 words)

DECLARATION

I _____ hereby solemnly declare that the entries and information furnished above in this application are true and correct to the best of my knowledge and I will abide by the rules and regulation of KVS.

(Sign with date)

List of Enclosure: _____

Documents Verified By:

1. _____ 2. _____ 3. _____
() () ()

Note:- Please fill separate form for each post.