

PM SHRI KENDRIYA VIDYALAYA SHEOPUR

APPLICATION FORM FOR PART TIME CONTRACTUAL TEACHERS/INSTRUCTORS/COACHES EXPERTS ETC. (2025-26)

- 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 post)

1. POST APPLIED FOR	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. Date of Birth:

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DAY

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MONTH

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YEAR

5. Gender
(Please Tick)

M	
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F	
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6. Age as on 31.03.2024

Year		Month		Days	
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7. Candidate Address

Name	:	
Father/Husband's Name:	:	
Address	:	
	:	
	:	
City/Town	:	PIN
Mobile No.	:	
(Mandatory)	:	
Email id	:	

Please affix one recent
Photograph without attestation

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8. Academic Qualification (Starting from Intermediate level)

(Please give information as applicable. (Attach self attested copies of mark sheets and certificates. For Graduation attach copy of mark-sheet of all years/semesters)

Signature of Candidate ↑

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			
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			
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)								

10. Experience (Attach 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				

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

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

YES		NO	
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12. Do you have knowledge of computer application?

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

YES		NO	
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13. Are you a family member of KVS Employees (Please mark (✓) tick in the appropriate box)

Yes	No
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14. Caste: GEN / SC/ ST/ OBC**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_____

Mobile No._____

Name_____