



**8. Professional Qualification (Attach attested copies of marksheets & certificates)**

| Name of Examination<br>(with complete name<br>of course passed) | Write name 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<br>of<br>marks |                             |   |                      |
| JBT/B.E.ED/<br>(specify)  |  |                    |                 |                   |                     |                             |   |                      |
| B.ED  | Theory                                 |                    |                 |                   |                     |                             |   |                      |
|   | Practical                              |                    |                 |                   |                     |                             |   |                      |
| BE/B.Tech (CS/IT)<br>MCA/MSC(CS/IT)                             |  |                    |                 |                   |                     |                             |   |                      |
| CTET PRIMARY  |  |                    |                 |                   |                     |                             |   |                      |
| CTET SECONDARY  |  |                    |                 |                   |                     |                             |   |                      |
| ANY OTHER   |  |                    |                 |                   |                     |                             |   |                      |

**9. Experience:-**

| Post held | Name of Institution | Period of service |    | No. of completed years & months | Class taught | Subjects taught |
|-----------|---------------------|-------------------|----|---------------------------------|--------------|-----------------|
|           |                     | From              | To |                                 |              |                 |
|           |                     |                   |    |                                 |              |                 |
|           |                     |                   |    |                                 |              |                 |
|           |                     |                   |    |                                 |              |                 |
|           |                     |                   |    |                                 |              |                 |

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

11. 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"/> |
|-----|--------------------------|----|--------------------------|

12. SC/ST/OBC/GEN:.....

**UNDERTAKING**

I hereby certify that all the information given above are 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 \_\_\_\_\_

Candidate's Signature \_\_\_\_\_

.....FOR OFFICE USE ONLY.....

Date of Receipt:

FORM COLLECTOR'S NAME & SIGN

CHECKED BY