PM SHRI KENDRIYA VIDYALAYA KONNI

REGISTRATION FORM FOR THE POST OF .....

FOR THE SESSION 2026-27

[PLEASE MAKE ALL ENTRIES IN CAPITAL LETTERS ONLY]

A) PERSONAL DETAILS

1	Name	Mr/Mrs/Miss	
2	Current Postal Address with PIN Code		
3	Telephone No & Mobile No		Alternate No
4	Aadhar No		
S	Email ID		
6	Tick the category to which you belong	SC/ST/OBC/GEN	
7	Date of Birth		

B) EDUCATIONAL DETAILS (Attach copies of certificate}

SINO	Qualification		Main Subjects	Percentage(%)	Board/Univ	Year	Index Mark
1	Matriculation						
2	+2						
3	Bachelor degree						
4	Master degree						
5	Higher Qualification						
6	Professional Qualification						
7	CTET/NET/SET/(any other)						

C) COMPUTER PROFICIENCY (Attach copies of certificate)

SINO	Course	Duration	Conducted by
2			

D) TEACHING EXPERIENCE (Experience in KV/CBSE School to be listed first Attach copies of certificate|

SINO	Name of the Institution	Period		Classes taught	Subjects taught
2					
3					
4					
5					
6					

E) ANY OTHER INFORMATION YOU WOULD LIKE TO FURNISH

Certified that the above information are true.

Signature of Candidate with date

Name:.....

Signature of the Verifying Officer

Name:.....

Designation:.....