PM SHRI KENDRIYA VIDYALAYA AFS JAISALMER (SESSION: 2025-26)

REGISTRATION CUM APPLICATION FORM (PART TIME CONTRACTUAL)

	Applied for:							<i>_</i>		
1. Name of the Car	ndidate:									
2. Father's name/ Husband's Name:									Dogto your	
3. Address for Communication/Contact:									Paste your latest	
3. Address for Communication/Contact									photograph	
									here	
	2						ler			
6. Date of birth :	7. Aa	adharNo	:			8.	PAN No :			
9. Educational Qualification :-										
Exam	Name of Course	Board/	Board/University		Passing Year		Subjects		% of Marks	
Coondowy/10th										
Secondary/10th Sr. Sec./12 th /Inter.										
Graduation		<u> </u>						_		
Post-Graduation								-		
Diploma										
Any other										_
Qualification										
10. Professional Q	ualification:									
Course Name of Course Board/University Passing Subjects									% of Mar	ks
Course Ivaline of Course			id om versi	.cy	Year				, , , , , , , , , , , , , , , , , , , ,	
STC/JBT/DLED						T				
B.ED										
CTET (Level-1)										
CTET (Level-2)										
						4				
	erience if any: (Kind	lly subm	it attested c	opy o	of certifi	icat	e issued by the co	ncerne	ed	
institution) S.No Organization			Capacity/Post held			l	Period			
5.1vo Organization			Capacity/1 ost field				From		То	
							110111		10	
			-							
12 Are you able to	teach both in Hindi	and Enc	lich:				(Vec/No)			
12.Are you able to teach both in Hindi and English:(Yes/No) 13. Do you have basic knowledge of computer applications:(Yes/No)										
14. Are you near relative of any KVS employee/ Board member / VMC Member of Vidyalaya: (Yes/No);										
	Relative and Relation								•••••	
	I undertake to state									
	anything is found wi									
	fect. I fully understand fect. I fully understand fect. I fully understand fect.			urery	part un	ile C	omractual and doc	es not	conner any	
Date: Signature of the Applicant: Name:										
	e above information			m usi	ing link	:				
https://bit.ly/	KVAFSJSM									
		For	r Office Us	e Onl	ly					•
I verified all docur	ments submitted by t	he appli	cant from tl	neir o	riginals	and	d confirm his/her	ligibil	lity for the	

Signature of Verifying Officer:............ Name and Designation of Verifying Officer:......

post applied as per KVS norms.