## PM SHRI KENDRIYA VIDYALAYA No. 1 BATHINDA CANTT.

## APPLICATION FORM FOR PART TIME CONTRACTUAL TEACHERS/INSTRUCTORS/COACHES/EXPERTS

		e form sl close atte							each	form	. (If ap	plied	for n	nore tl	nan o	ne po	st)
POST APPLIED FOR						SUBJECT APPLIED FOR (In Case of PGT/TGT)								)			
. Candidate's Name (	in ca	pital lett	ers) (F	Please kee	ep one bo	ox blank	between	First nam	e, Middle	e name &	Last name	e)					
Father's /Husband's (Please keep one box blank between					ne)			Fathe	er				Hus	band			
Date of Birth:	DAY	7		MONTH	H			YEAR				ender		М			F
. Category Gen./SC/S	T/O	BC:															
. PAN:												Plea Pho		affix ph <u>with</u>	one out at	rece t <b>estati</b>	
. Age as on 31.01.202	5	Year			Мо	onth			Days								
. Mobile No :																	
0. Email Address:																	
1. Candidate Address	s (wit	th pin co	ode) (	in cap	itals l	etters	)										
													Sign	ature	of Ca	ındida	ate
2. Academic Qualific (Please give information								of Mar	k shee	ets and	1 Certit	i ficates)	)				
Name of Examination	Write	e name	Year					GATE M			Subjec	ets	I	Ouration		Board	,
(with complete name of	of Ex	amination	passi	ng	3.4			[orles	0/	C	/Specia	alization	0	of course		Univer	sitv

Name of Examination (with complete name of course passed)	Write name of Examination passed	Year of passing	AG	GREGATE MA	ARKS	Subjects /Specialization	Duration	Board/	
			Max. Marks	Marks obtained	%age of marks		of course (in months)	University	
High School (Class X)									
Intermediate (Class XII)									
Graduation (Name of Course)									
Post-Graduation (Name of Course)									
Others if any (Specify)									

## 13. Professional Qualifications (Attach attested copies of mark sheets & certificates) AGGREGRATE MARKS Name of Write name Year of Subjects Duration Board/ **Examination** passing /Specialization of course University Marks %age of Max. (with complete name Examination (in Marks obtained marks months) of course passed) passed JBT/B.ED/ (specify) BE/B.Tech(CS/IT )/MCA/PGDCA/ **MBBS** Degree/Diploma in Nursing/ Counselling Other if any (specify) **CTET** 14. Experience (Attach separate sheet, if columns are insufficient) Period of service **Post Subjects taught** Name of No. of Classes Scale of pay held Institution completed taught and salary From To years & months per month 15. Are you able to teach through English and Hindi, both? YES NO (Please mark ( $\sqrt{ }$ ) tick in the appropriate box) For teaching posts 16. Do you have knowledge of computer application? YES NO (Please mark ( $\sqrt{}$ ) tick in the appropriate box) For teaching posts 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 of any information is found to be incorrect on verification. Place\_\_\_\_\_ Signature\_\_\_\_\_ Date Checked By: Verified By: