KENDRIYA VIDYALAYA WARDHA 442001

# APPLICATION FORM FOR APPOINTMENT OF TEACHERS ON COTRACT BASIS

Important notes: 1. All entries should be made in capital letters

Session: 2023-24

1. One form should be used for one post.
2. Enclose attested copies of testimonials with each form. (If applied for more than one post)



**POST APPLIED FOR**



**SUBJECT APPLIED FOR**

1. **Candidate’s Name** (in capital letters) (Please keep one box blank between First name, Middle name & Last name)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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1. **Father’s /Husband’s Name** (in capital letters) Father

(Please keep one box blank between First name, middle name & Last name)

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1. **Occupation of Spouse with Address** (if applicable)

Husband

………………………………………………………………………………………………………………………………………………………………………………………………….

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| --- | --- | --- | --- |
|  |  |  |  |

# Date of Birth:

DAY

MONTH

YEAR

1. **Gender**

(Please Tick)



1. **Age** as on 31.03.2O23



Please affix one recent Photograph

without attestation

1. **Candidate Address** (in capitals letters)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name :  Father/Husband’s Name: Address :  City/Town :  Ph/Mobile No. : 1. | | | | | | | |
| 2. PIN |  |  |  |  |  |  |  |

Signature of Candidate

1. **Academic Qualification** (Starting from High School level)

(Please give information as applicable. (Attach attested copies of Mark sheets and 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 |
| High School (Class X) |  |  |  |  |  |  |  |  |
| Intermediate (Class XII) |  |  |  |  |  |  |  |  |
| Graduation (Name of Course) |  |  |  |  |  |  |  |  |
| Post Graduation (Name of Course) |  |  |  |  |  |  |  |  |
| Others if any (Specify) |  |  |  |  |  |  |  |  |

1. 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 | AGGREGRATE MARKS | | | Subjects  /Specialization | Duration of course (in months) | Board/ University |
| Max. Marks | Marks obtained | %age of marks |
| D. Ed./B. El. Ed. |  |  |  |  |  |  |  |  |
| B. ED |  |  |  |  |  |  |  |  |
| BE/B.Tech(CS)/ MBBS  Degree/Diploma in  Nursing |  |  |  |  |  |  |  |  |
| Other if any (specify) CTET |  |  |  |  |  |  |  |  |

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Post held | Name of Institution | Period of service | | No. of completed years & months | Class taught |
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# Are you able to teach through English and Hindi, both?

YES

NO

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

# Do you have knowledge of computer application?

YES

NO

(Please mark (√) 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 attest ed 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

Contact No.

Signature

Name