KENDRIYA VIDYALAYA SHRAWASTI

APPLICATION FORM FOR APPOINTMENT OF TEACHERS/INSTRUCTORS/COACHES

EXPERTS/DOCTOR/NURSE,COUNSELLOR/YOGA, ETC ON COTRACT BASIS.

Session 2022-23

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

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

(Please in Computer	POST APPLIED FOR (Please indicate whether PGT/TGT/PRT/ Computer Instructor/Experts in Art & Craft/ Coaches/Doctor/Nurse/Yoga in the box)													ECT APPLIED FOR e of PGT/TGT)					
Candidate's Name	(in cap	ital lett	ers) (F	Please	keep on	e box	blank be	etweei	First	name	, Midd	dle nan	ne &	Last n	ame)				
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Father's /Husband (Please keep one b							ather me & La	st nam	ie)			Husbaı	nd [
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Date of Birth: Age as on 31.03.20		DAY		мо	ONTH .		Mon	YEAR th		Da		5. Gei Please			M]	F	
Candidate Addres	s (in ca _l	oitals le	tters)																
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Father/Husband	d's Nam	ne:												Photog	graph <u>w</u>	1thou	t attes	tation_	
Address	: :																		
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Academic Qualific	ation (S	Starting	from	High S	chool le	vel)								Si	gnatur	e of C	Candi	date	

(Please give information as applicable. (Attach attested copies of Mark sheets and Certificates)

Name of Examination	Write name		AGG	REGATE MAI	RKS		Duration	
(with complete name of course passed)	of Examinatio n passed	Year of passing	Max. Marks	Marks obtained	%age of marks	Subjects / Specialization	of course (in months)	Board/ University
High School (Class X)								
Intermediate (Class XII)								
Graduation (Name of Course)								
Post Graduation (Name of Course)								
Others if any (Specify)								

		Write name		AGG	REGRATE M	IARKS		Duratio	ın l		
Examination (with complete name of course passed)		of Examination passed	Year of passing	Max. Marks	Marks obtained	%age of marks	Subjects /Specialization	of cours (in months	se Board/ University		
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Theory											
B.ED	B.ED Practical										
Degree, Ni Oth	Tech(CS)/ MBBS /Diploma in ursing er if any										
(sp	pecify)										
). Experie	ence (Attach	separate sheet,	if columns	are insuffici	ent)						
•	Period of service Name of				No. of completed Class				Scale of pay and		
Post held Institu			То	years & months		taught	Subjects taught		salary per month		
(Please	mark ($$) tick have knowled	through English in the appropriat ge of computer a in the appropriat	e box) For teapplication?	aching posts		L	YES YES	NO NO			
nereby cert	tify that all th in support of	e information giv	ven above is above. I also	NDERTAK true and corr	ect to the be ere eligibili	ity does not	nowledge. I have a confer right to be cation.				

Contact No.____

Signature_____