

PM SHRI KENDRIYA VIDYALAYA NO-1 AHMEDNAGAR
Application form for part time contractual teachers for the session 2024-2025

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POST APPLIED FOR :

1. Candidate's Name (in capital letters) :
2. Father's /Husband's Name (in capital) :
3. Date of Birth :
4. Age as on 31.01.2021 :YEARS.....MONTHS.....DAYS
5. Gender :

Academic qualifications (Attach self-attested copies of mark sheets & certificates)

S.No.	Name of Examination	Year of passing	AGGREGATE MARKS			Subjects/ Specialization	Duration of course (in Months)	Board/University
			Max Marks	Marks Obtained	% of mark s			
1	High school(class X)							
2	Intermediate(ClassXII)							
3	Graduation (BA/BSc/BE/BTech)							
4	Post Graduation (MA/MSc/MCA/M.Tech)							
5	Others if any (Specify)							

Professional Qualification (Attach self-attested copies of mark sheets & certificates)

Name of the Examination	Name of Exam Passed	Year of passing	Aggregate Marks			Subjects /Specialisation	Duration of the course (in months)	Board/ University
			Max Marks	Marks obtained	% of marks			
JBT/ D.Ed (specify)								
B.Ed								
BE/B.Tech								
Other, if any (specify)								

Experience (Attach self-attested copies of mark sheets & certificates)

Post held	Name of the institutions	Period of service		No of completed years & Month	Classes taught	Subject(s) taught	Scale of pay& salary per month
		From	To				

Whether qualified CTET (Central Teacher Eligibility Test) (for Primary Teachers & Trained Graduate Teachers only)	YES /NO	Marks Obtained	% MARKS	YEAR OF PASSING
Do you have knowledge of computer application? (SPECIFY YES/NO)				
Are you able to teach through English and Hindi, both?(SPECIFY YES/NO)				

SIGNATURE OF CANDIDATE WITH DATE

Do you have any relationship with any KVS Regular Employee - (Specify YES /NO).....

IF YES, DETAILS OF KVS Regular Employee –

NAME KVS Regular Employee : Designation.....

Name of School/Office.....

UNDERTAKING BY CANDIDATE

I hereby certify that all the information given above is true and correct to the best of my knowledge. I have attached self-attested copies of my testimonials in support of the entries made above. I also agree that mere eligibility does not confer right for selection. My candidature may be cancelled in case any information is found to be incorrect on verification. I also undertake that I would have no claim or right for appointment on regular basis to be a part of the cadre of teachers of Kendriya Vidyalayas.

Place :

Date :

SIGN OF CANDIDATE

Candidate's complete Address (in capitals letters)

.....
.....
.....
.....
.....

Contact No.			
E-mail ID :			

FOR OFFICIAL USE

CHECKLIST:

NAME OF EXAM	QUALIFIED YES/NO	MARKS %
Intermediate(ClassXII)		
Graduation		
Post Graduation		
JBT/ D.Ed/		
B.Ed		
BE/B.Tech/ DOEACC		
CTET(FOR PRT&TGT)		
WHETHER ELIGIBLE FOR POST APPLIED		

SIGN OF VERIFIER :
NAME :
DESIGNATION :