| - Alle   |
|--|
| तत् त्वं पूषन् अपावृणु<br>केन्द्रीय विद्यालय संगठन |

KENDRIYA VIDYALAYA WCL NEW MAJRI

KUCHANA HOUSING COMPLEX KUCHANA Dist- CHANDRAPUR PIN 442503

Application form for part time contractual teachers for the session 2024-25

| 1. <b>POST APPLIED FOR</b><br>(Please indicate whether<br>PGT/TGT/PRT/Balvatika/Misc.                               |            |          |         |         |        |         |               |       |        |       |       | <b>BJE</b><br>case | -     |      | <b>LIED</b><br>GT) | FO                       | R |                 |
|---|------------|----------|---------|---------|--------|---------|---------------|-------|--------|-------|-------|--------------------|-------|------|--------------------|--------------------------|---|-----------------|
|   |            |          |         |         |        |         |               |       |        |       |       |                    |       |      |                    |                          |   |                 |
| Candidate'sName   | in capital | letter   | s)(Plea | ase kee | ep one | e box l | olank         | betwe | en Fir | st na | ne,Mi | ddle               | name  | & La | st nar             | ne)                      |   |                 |
|   |            |          |         |         |        |         |               |       |        |       |       |                    |       |      |                    |                          |   |                 |
| <b>3. Father's/Husband's Name</b> (in capital letters)<br>(Please keep one box blank between First name,middle name |            |          |         |         | ne & I |         | ather<br>ame) |       |        |       |       | Hı                 | ısban | d    |                    |                          |   |                 |
|   |            |          |         |         |        |         |               |       |        |       |       |                    |       |      |                    |                          |   |                 |
| 4. Date of Birth:    DAY      DAY    MONTH      6. Age as on 31.03.2024    DAY                                      |            |          |         |         |        | 1       |               |       | AR     |       |       | 5. Ge<br>Please    |       | .)   | М                  |                          |   |                 |
| Age as on 51.05.20  | Year Month |          |         |         |        |         |               |       | Day    | s     |       |                    |       |      |                    |                          |   |                 |
| -   |            | 11       |         |         |        |         |               |       |        |       |       |                    |       |      |                    |                          |   |                 |
| Candidate Addres  | s(in capit | al lette | ers)    |         |        |         |               |       |        |       |       |                    |       |      |                    |                          |   |                 |
| Candidate Addres  | :          |          | ers)    |         |        |         |               |       |        |       |       |                    |       |      | Pleas<br>Phote     |                          |   | one<br>t attest |
| Candidate Addres  | :          |          | ers)    |         |        |         |               |       |        |       |       |                    |       |      |                    | e afi<br>ograph <u>v</u> |   |                 |
| Candidate Addres<br>Name<br>Father/Husband  | :          |          | ers)    |         |        |         |               |       |        |       |       |                    |       |      |                    |                          |   |                 |
| Candidate Addres<br>Name<br>Father/Husband  | :          |          | ers)    |         |        |         |               |       |        |       |       |                    |       |      |                    |                          |   |                 |
| Candidate Addres<br>Name<br>Father/Husband  | :          |          | ers)    |         |        | PIN     | 1             |       |        |       | ]     |                    |       |      |                    |                          |   |                 |
| . Candidate Addres<br>Name<br>Father/Husband<br>Address<br>City/Town<br>Ph/Mobile No.1                              | :          |          | ers)    |         |        | PIN     | 1             |       |        |       | ]     |                    |       |      |                    |                          |   |                 |
| . Candidate Addres<br>Name<br>Father/Husband<br>Address<br>City/Town  | :          |          | ers)    |         |        | PIN     | 1             |       |        |       | ]     |                    |       |      |                    |                          |   |                 |

8. Academic Qualifications (Starting from High School level)

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

| Name of<br>Examination                        | Write<br>name of      | Year | A             | GGREGA<br>MARK    | Subjects /     | <b>Duration</b>          | Board/     |
|---|-----------------------|------|---------------|-------------------|----------------|--------------------------|------------|
| Examination                                   | Examination<br>passed |      | Max.<br>Marks | Marks<br>obtained | Specialization | of course<br>(in months) | University |
| High School<br>(Class X)                      |                       |      |               |                   |                |                          |            |
| Intermediate<br>(Class XII/PUC)               |                       |      |               |                   |                |                          |            |
| Graduation<br>(B.A/B.Sc./<br>B.Tech/B.E etc.) |                       |      |               |                   |                |                          |            |
| Post Graduation<br>(M.A/M.Sc./<br>MCA/M.Tech) |                       |      |               |                   |                |                          |            |
| Others if any<br>(Specify)                    |                       |      |               |                   |                |                          |            |

## 9. Professional Qualifications(Attach attested copies of mark sheets of each semester/years & certificates)

| Name of  | <b>TT</b> 7 •4                            |                       | AGGR          | EGATE N           | IARKS            |                             |                                      |                      |
|--|---|-----------------------|---------------|-------------------|------------------|-----------------------------|--------------------------------------|----------------------|
| Examination<br>(with complete<br>name of course<br>passed) | Write<br>name of<br>Examination<br>passed | Year<br>of<br>passing | Max.<br>Marks | Marks<br>obtained | %age of<br>marks | Subjects<br>/Specialization | Duration of<br>course (in<br>months) | Board/<br>University |
| JBT/B.El.Ed/D.Ed<br>(specify)                              |   |                       |               |                   |                  |                             |                                      |                      |
| B.Ed.  |   |                       |               |                   |                  |                             |                                      |                      |
| BE/B.Tech(CS)/   |   |                       |               |                   |                  |                             |                                      |                      |
| Other if any<br>(specify)                                  |   |                       |               |                   |                  |                             |                                      |                      |
|  |   |                       |               |                   |                  |                             |                                      |                      |

## **10.** Experience (Attach Experience certificate in support of experience)

|           | Name of     | Period of service |  | Period of s |                 | Period of service       |  | No. of | Class |  | Scale of pay |
|-----------|-------------|-------------------|--|-------------|-----------------|-------------------------|--|--------|-------|--|--------------|
| Post held | Institution |                   |  |             | Subjects taught | and salary per<br>month |  |        |       |  |              |
|           |             |                   |  |             |                 |                         |  |        |       |  |              |
|           |             |                   |  |             |                 |                         |  |        |       |  |              |
|           |             |                   |  |             |                 |                         |  |        |       |  |              |
|           |             |                   |  |             |                 |                         |  |        |       |  |              |

| <b>11.</b> Are you able to teach in English and Hindi, both?     |  |
|--|--|
| (Please mark( $$ )tick in the appropriate box)For teaching posts |  |

ENGLISH

NO

вотн

12. Do you have knowledge of computer applications? (Please mark ( $\sqrt{}$ ) tick in the appropriate box) For teaching posts

## UNDERTAKING

HINDI

YES

I hereby certify that all the information given above in (S.N. 1 To 12) 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 any information is found to be incorrect on verification.

| Place | Date |
|-------|------|
|       |      |

| Signature  |  |
|------------|--|
| Note       |  |
| Name       |  |
| ContactNo. |  |
| E-mailID:  |  |
|            |  |

Checked/Verified by

Sign

Name .....

Designation .....

- All the applicants are requested to check their names in the eligible candidates list on Vidyalaya Website www.malanjkhand.kvs.ac.in before coming for Interview.
- It is compulsory to submit the photocopies of all the testimonials along with this Application form on or before
  09 /02 /2024. For the post TGT it is compulsory to submit photocopies of mark sheet of each semester/year at Graduation level.
- Candidates are requested to carry original testimonials along with them at the time of interview.