PM SHRIKENDRIYA VIDYALAYA, ORDNANCE FACTORY BHANDARA पीएम श्री केंद्रीय विद्यालय आयुध निर्माणी भंडारा-441906 (APPLICATION FORM FOR PART-TIME CONTRACTUAL TEACHER FOR SESSION 2024-25)

Application for the post of Advt date: Important Notes: All entries should be made in CAPITAL letters , Walk-In Interview: Date of Submission of application form : At the time of verification (Interview Date)								
1. Candidate's Name (in capital letters) (please keep one box blank between name, middle name & sur name)								
2. Father's/Husband's Name (in capital letters) Father (Please mark (v) tick in the appropriate box)	Husband							
3.(a) Gender:	Female Please affix one recent Photograph							
Name :								
Father /Husband Name :								
Address :								
Pin Code:	Signature of candidate							

6. Academic Qualification (starting from + 2 stage) (Please give information as applicable. Attach separate sheet if columns are insufficient.)

Name of Examination	Please write,		AG	GREGATE M	ARKS		
(write complete name of course passed)	name of Examination Passed	Year of Passing	Max. Marks	Marks Obtained	%age of marks	Subjects offered	Board/ University
Senior Secondary (Class – XII)							
Graduation (Name of course)	-						
Post-Graduation (Name of course)							
Other if any, (Specify)							
Other if any, (Specify)							

7. **Professional Qualification**

Name of Examination	Please write,			AGGREGATE M	ARKS		
(write complete name of course passed)	name of Examination Passed	Year of Passing	Max. Marks	Marks Obtained	%age of marks	Subject Offered	Board/ University
JBT/B.EI.Ed. etc. (Specify)							
B.Ed.							
BE/B.Tech(CS)/ MBBS Degree/ Diploma in Nursing							Č
Others if any (Specify)							

8. **Experience (if, any)**

	Name of Institution/	Private / Govt.	Period of Service		No. of Completed	Remarks, if	
Post Held	Department/ Ministry		From	То	years & months	Nature of Duties	any
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9. Are you computer literate?

(Yes/No) ____

10. Are you able to teach through English and Hindi, both

(Please mark ($\sqrt{}$) tick in the appropriate box)

HINDI ONLY	ENGLISH ONLY	Both Hindi and English
		-

DECLARATION TO BE SIGNED BY THE CANDIDATE

I hereby certify and declare that:

(i) I am an Indian National.

- (ii) All statements made and information given by me in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information or part of it being found false or incorrect before or after the exam./interview or after Part –Time contractual appointment, action can be taken against me by the KVS/Vidyalaya and my candidature/appointment(contractual) shall automatically stand cancelled.
- (iii) I further declare that I fulfill all the conditions of eligibility regarding age, educational, professional/technical qualifications, etc. prescribed for the post applied for as on 04thMarch 2024. The essential qualifications prescribed are possessed by me, the proof of which have been enclosed.
- (iv) I have no claim for regular appointment as well as reservation for SC/ST/OBC/Minority etc. in KVS as this advertisement is only for this Vidyalaya temporarily arrangement and part-time contractual basis.

Place	:	
Date	:	

Contact No.:

Signature_	
Name	

APPLICATION FORM BALVATIKA TEACHER

PM SHRI KENDRIYA VIDYALAYA, ORDNANCE FACTORY BHANDARA <u>पीएम श्री केंद्रीय विद्यालय आयुध निर्माणी भंडारा-441906</u> (APPLICATION FORM FOR PART-TIME CONTRACTUALTEACHER FOR SESSION 2024-25)	
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3. Candidate's Name (in capital letters) (please keep one box blank between name, middle name & sur name)	.
4. Father's/Husband's Name (in capital letters)	
3.(a) Gender:	
5. Candidate Address (in capital letters)	
Name : Father /Husband Name :	
Address :	
Pin Code:	
E mail :	-

6. Academic Qualification (starting from + 2 stage) (Please give information as applicable. Attach separate sheet if columns are insufficient.)

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(write complete name of course passed)	name of Examination Passed	Year of Passing	Max. Marks	Marks Obtained	%age of marks	Subjects offered	Board/ University	
Senior Secondary (Class – XII)	•							
Graduation (Name of course)	•							
Post-Graduation (Name of course)								
Diploma in Nursery Teacher Education/ D.E.C.Ed								
B.Ed (Nursery) NCTE recognized University								
Any Other								

7. **Professional Qualification**

Name of Examination	Please write,			AGGREGATE M	ARKS			
(write complete name of course passed)	name of Examination Passed	Year of Passing	Max. Marks	Marks Obtained	%age of marks	Subject Offered	Board/ University	
JBT/B.EI.Ed. etc. (Specify)								
B.Ed.								
BE/B.Tech(CS)/ MBBS Degree/ Diploma in Nursing							Č	
Others if any (Specify)								

8. **Experience (if, any)**

	Name of Institution/	Private / Govt.	Period of Service		No. of Completed	Remarks, if	
Post Held	Department/ Ministry		From	То	years & months	Nature of Duties	any
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Place		
Date	:	

Contact No.:

Signature_	
Name_	