

APPLICATION FORM

For Part-time Contractual Teachers (2017-18)

POST :

1	Name (in block letters)																																														
2	Fathers/ Husband Name																																														
3	Date of Birth		Age (Years)																																												
		In case of PRT/TGT, CTET score																																													
4	Educational Qualification																																														
5	Professional course, if any																																														
6	Employment Exchange No.																																														
	Place registered:																																														
7	SC/ST/OBC (mention the name of the community) Attested copy to be enclosed																																														
6	Residence Address																																														
7	Residence Phone No.																																														
8	Mobile Phone No.																																														
9	Email Id																																														
10	QUALIFICATION DETAILS																																														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">Sl. No</th> <th style="width: 25%;">Name of Examination</th> <th style="width: 25%;">Name of Board / University</th> <th style="width: 10%;">Year of passing</th> <th style="width: 10%;">Percentage obtained</th> <th style="width: 20%;">Subjects offered</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">b</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">c</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">d</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">e</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">f</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Sl. No	Name of Examination	Name of Board / University	Year of passing	Percentage obtained	Subjects offered	a						b						c						d						e						f					
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11	DETAILS OF EXPERIENCE						
	Sl No	Name of Institute	Post Held	Classes Taught & Subject	Period/ Duration	No. of years	Board (CBSE/ICSE/STATE)
	a						
	b						
	c						

12	COMPETENCY DETAILS		
	1.	Computer	
	2.	Any other	

I _____ hereby declare that the above statement furnished by me is / are true to the best of my knowledge and belief. If any information is found false , I will bear the responsibility as per the rules.

Signature : _____

Contact Numbers : 1.

Name : _____

2.

Date : _____

3.

FOR OFFICE USE ONLY

Verified the certificates and found the candidate eligible/ not eligible for the for the interview .

Verification by the Committee Members

Sl. No	Name of the teacher	Signature
01		
02		