

**TOTAL** 

## केन्द्रीय विद्यालय क्र01, छिन्दवाडा धरम टेकरी जिला छिन्दवाडा (म.प्र.) 480001 KENDRIYA VIDYALAYA, NO-1 Chhindwara DharamTekri, Distt- Chhindwara (M.P.) 480 001

e-mail- chhindwarakv@gmail.com , Website- www.chhindwara.kvs.ac.in

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Post Applied foron contractual part-						n 202	3-24						
1. Name (In Capital) :										Phot	ograph		
Name (in Hindi):													
2. Date of Birth:			Gender (Ma	le/Female)	:								
3. PAN No :			4. AADH	AR No									
5. Category (SC/ST/OBC,	/Gen):			6. Marital S	tatu	ıs							
7. Contact Address:													
City		Di	strict				State						
7. Phone No. with STD C	ode:			Е	. ma	il							
8. Mobile No.: (1)			(2) .				(3	)					
9. Academic Qualification (Please give information	-	_	_	-	s of	Mark s	heets and	d Certif	ficates)				
Name of Examination	Write	name	Year of	AGO	GREG	ATE MA	RKS	Subje			ation	Boa	ard/
(with complete name of course passed)	of Examin passed		passing	Max. Marks		arks tained	%age of marks	_ /Spec	ializatioi	of co	ourse nonths)	Uni	versity
High School (X)													
Higher Secondary (XII)													
Graduation (Name of Course)													
Post Graduation (Name of Course)													
Others if any (Specify)													
GRADUATION SUBJEC	TS		SUBJEC	T -1			SUBJEC	T -2		•	SUBJEC	Т -3	
(ONLY FOR TGT POST)		Max. Marks	Marks obtained	% Marks		Max. Marks	Marks obtaine	% M	larks	Max. Marks	Marks obtaine	7	% Marks
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YEAR													
YEAR													

Note: - Please provide information for the qualification completed by 1<sup>th</sup> March 2022 only.

10. Professional Qualification (Attach attested copies of mark sheets & certificates)

(with complete name of course passed)    Max.   Marks   %age of marks   wassed   warks   wassed   wassed   warks   wassed   was					P = 220				/Specialization		
Qualified  CTET (VI to VIII) Qualified  B.ED/ Theory JBT/D Practical  MBBS Degree /Diploma in Nursing / Counseling/Yoga  Other if any (specify)  11. Experience (Attach certificates if experience is in the recognized Schools) – priority will be given.  St. Name of Period of service No. of completed years & months  Institution  From To To Theory  JBT/D Practical  Description  Class Subjects taught Scale of pay and salary per sa	course	-	passed					_	, , ,		Univers
CTET (VI to VIII) Qualified  B.ED/ Theory JBT/D ED Practical  MBBS Degree /Diploma in Nursing / Counseling/Yoga  Other if any (specify)  11. Experience (Attach certificates if experience is in the recognized Schools) – priority will be given.  St. Name of Period of service years & months taught  From To Period of pay and salary per	CTET	(I to V)									
Qualified  B.ED/ Theory  JBT/D Practical  MBBS Degree  /Diploma in Nursing / Counseling/Yoga  Other if any (specify)  11. Experience (Attach certificates if experience is in the recognized Schools) – priority will be given.  St. Name of Institution  Period of service No. of completed years & months  No. of completed years & Subjects taught  No. of completed years & Subjects taught  No. of completed years & Subjects taught	Qualif	fied									
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		Institution	From	То	years 8	& months	taught				y per
12. Are you able to teach through English and Hindi, both? (Please mark (v) tick in the appropriate box) For teaching posts		Institution	From	То	years 8	& months	taught				у рег
Character (Annual Character Characte	12. Are	you able to t	each throug	gh Englis	sh and Hind	li, both?	VE	s	NO		у рег
13. Do you have knowledge of computer application?  YES  NO	12. Are (Please	you able to temark (V) tick	each throug in the appr	gh Englis	sh and Hind box) For te	li, both? aching posts	VE	S	NO		у рег
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AGGREGATE MARKS

Subjects

Duration

Board/

Name of Examination

Write name

Year of