

केंद्रीय विद्यालय चंदेरी, जिला- अशोकनगर (म.प्र.)

Kendriya Vidyalaya Chanderi, Distt:-Ashoknagar (M.P.)

E-Mail address: ppl.chanderi@kvs.gov.in

Web-Site: www.chanderifatehabad.kvs.ac.in
Mobile no: +919407267622
REGISTRATION FORM FOR CONTRACTUAL TEACHERS
FOR THE SESSION 2024-25

Paste your Photo Here

| POST APPLIED- | | | | SUBJECT- | | | | | |
|---|-----------------------------------|----------------|-----------|-------------|-----------|--------|---------------------|-----------------------|--|
| CANDIDATE NAME (In Capital Letters) | | | | | | | | | |
| FATHEF | S NAME(In Capital Letters) | | | | | | | | |
| MOTHER'S NAME(In Capital Letters) | | | | | | | | | |
| DATE OF BIRTH PRESENT ADDRESS | | | | | | | | | |
| | | | | | | | PIN CODE | | |
| MOBILE No. 1 | | | | | | | | | |
| MOBILE No. 2 | | | | E MAIL ID - | | | | | |
| EDUCAT | IONA QUALIFICATION (ACEDMIC&F | PROFESSIONAL) | | | | | | | |
| Sr. No. | QUALIFICATIO | SUBJECT/DEGREE | | | YEAR | PASS % | SUBJECT COMBINATION | | |
| 1 | 10th/High School | | | | | | | | |
| 2 | 12th/Higher Secondory | | | | | | | | |
| 3 | BA/BCOM/BSC/BPE/BPES | | | | | | | | |
| 4 | MA/MCOM/MSC/MPED | | | | | | | | |
| 5 | BE/MCA/PGDCA/DIPLOMA | | | | | | | | |
| 6 | DED/BED/MED/BPED | | | | | | | | |
| 7 | CTET | | | | | | | | |
| EXPERIENCE DETAILS | | | | | | | | | |
| Sr. No. | SCHOOL/COLLAGE/ANY OTHER | POST HOLD | FI | PE ROM | PERIOD To | | DURATION | YEAR | |
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| | | | | <u> </u> | | L | | | |
| | Do you have knowledge of Computer | • • | YES | | NO | | - | | |
| ii Are you able to teach through English and Hindi, both? YES NO II | | | | | | | | information furnished | |
| above is found false my candidature may be treated as cancelled. | | | | | | | | | |
| Date | | | | Signature | | | | | |
| $\label{eq:Palace} \begin{array}{ll} Palace \coloneq Chanderi (M.P.) \\ & \\ \hline \textbf{Filled by School} \end{array}$ | | | | Name | | | | | |
| Verified | by : 1. Name | | | Sigi | nature | | | | |
| | 2 Name | | Signature | | | | | | |