## PM SHRI KENDRIYA VIDYALAYA CMM, JABALPUR

## APPLICATION FORM FOR PART TIME CONTRACTUAL TEACHERS/MISSELANEOUS POSTS SESSION 2024-25

Registration No. (For Office Use Only)										
	ne form shou	ıld be u	sed for o	ne post.		form. (If appli	ied for more th	an one post		
POST APPLIED I	1 1	JECT A	PPLIED I	FOR	*Registration No. with MCI/NCI (*Applicable only for the Post of Doctor/Nurse)					
2. Candidate's Name	e (in capital l	etters) (	(Please keep	one box blank	between Firs	t name, Middle nan	ne & Last name)			
3. Father's /Husban (Please keep one box blank be				me <del>)</del>	Fathe	er	Hus	band		
4. Date of Birth:  6. Age (as on 31.03.2)  7. Candidate Address  Name :	Tea		Mon	YEAI	R Days	5. Gender (Please Tick	) [М]	ne recent		
Father/Husband's Name Address : : : City/Town : Ph/Mobile No. :1.	:	P) 2.	IN _							
8. Academic Qualific	•	_	_		,	· ·	nature of Car			
Name of Examination (with complete name of course passed)	Name of Examination passed	Year of passing		GREGATE MA Marks obtained		Subjects / Specialization	Duration	Board/ University		
High School (Class X)										
Intermediate (Class XII) Graduation (Name of Course)										
Post Graduation (Name of Course)										
Others if any										

Name of Examination (with complete name of course passed)		Write name	Year of	AGG	REGRATE M	ARKS	S	ubjects /	Duration		ard/
		of Examination passed	passing	Max. Marks	Marks obtained	%age Sp of marks		ecialization	of course (in months)		University
CTET (I Qualifie											
	/I to VIII)										
Qualifie											
B.ED -	Theory										
D.ED	Practical										
MBBS/I											
(Nursin											
	g/ 1 Year										
Diplom	a in Yoga/										
B.P.Ed.	·										
Other if (specify											
	rience (Att	ach senara	te sheet i	if colum	ns are in	sufficien	ıt)				
Post	Name of		l of servic			Class	111	Subjects		Scale	of pay
held	Institutio	n From	То	con	completed		t	taught		and sa	
				-	rs &					per m	per month
				mo	nths						
	ou able to	-	0		•			YES		NO	
(Plea	se mark (√	) tick in th	e appropi	riate bo	x) For tea	iching p	osts	120			
2. Do yo	ou have kno	owledge of	compute	r applic	ation?			YES		NO	
	se mark (√				x)			120			
.3. Are you a family member of KVS Employee (Please mark $()$ tick in the appropriate box)				`			YES		NO		
	then provi			ate box	)						
Name											
	nation:										
KV											
				UNDEF	RTAKING						
ave atta nere eliş	certify that ched attestogibility does in case any	ed copies o s not confe	f my testin er right to	nonials i be cal	in support led for in	t of the e terview,	ntri /sel	es made a ection. My	bove. I a	lso agr	ee tha
lace						Signatur	e:_				
ate						Contact 1	No.	I			