Application form FOR THE YEAR 2024-25

**Application for the post of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** (Apply separately for each post) Application No.\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
|  PHOTO |

1. Name of the Candidate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Father’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Date of birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Present Employment Regn. No.(If any)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Whether belongs to S.C./S.T/

O.B.C./Physical handicapped \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Exam. passed | Board/Univ. | Passing of Year | Subjects | Max.marks | Marks obtained | Division | %age of marks |  |
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|   |   |   |   |   |   |   |  |

 (6) Educational Qualification:-

(7) PROFICIENCY IN GAMES/SPORTS AND OTHER ACTIVITES:

|  |  |  |  |
| --- | --- | --- | --- |
| S.NO. | NAME OF THE ACTIVITY | PARTICIPATION LEVEL SCHOOL/COLLEGE/DISTT./STATE/NATIONAL | REMARKS |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

(8) EXPERIENCE OF RECOGNISED SCHOOL, Duly countersigned by the competent authority:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| S.NO. | NAME OF SCHOOL |  PERIOD | TOTAL EXPERIENCE | REMARKS |
| FROM |  TO |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

(9) OTHER QUALIFICATION WHICH THE CANDIDATE LIKES TO MENTION:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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FULL POSTAL ADDRESS: Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE/MOBILE NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_