PM SHRI KENDRIYA VIDYALAYA TUMKUR REGISTRATION/APPLICATION FORM/BIO DATA

Important notes:

1. All entries should be made in capital letters

2. One form should be used for one post.

2	Enclose ottested		of to atime on in	la reviele a a ale	former announces	(If amaliad	I fan meane tham	~ ~ ~ ~ ~ ~ ()
	. Enclose allesied	contes	of testimonia	is with each	form separately.	(II applied	i for more than	one dosu
-					J .	(p		· · · · · · · · · · · · · · · · · · ·

1.	POST APPLIED FOR (Please indicate whether PGT/TGT/PRT/Computer Instructor/Doctor/ Nurse/ Yoga Instructor/Counsellor/Sports Coach/Special Educator/Others in the box below)								SUBJECT APPLIED FOR (In case of PGT/TGT)		
								F			
2. Car	ndidate's Name (in capit	al letters) (Pl	ease keep or	e box blank	between First	name, Mie	ddle name	& Last name)			
3. Fat	her's /Husband's Name	(in capital let	ters)	Fa	ather		Husband				
Γ											
-	ease keep one box blank te of Birth:	between Firs	t name, mido	lle name & La	ast name)		· · · ·	5. Gender	, Г	M	
	e as on 01.03.2024		Year		Month		Days	(Please Tick) L	<u></u>	
	bile No (Mobile No sho	uld be Active)				I				
	natsapp No (if any)										x one recent
10. Ca	andidate Address (in cap	itals letters)								Photograph attestation	n <u>withou</u> t
	Name :										
	Father/Husband's Name Address	2:									
	City/Town : Ph/Mobile No. :			PIN						Signature o	f Candidate

11. Academic Qualification (Starting from High School level)

(Please give information as applicable. (Attach self-attested copies of Mark sheets and Certificates)

Name of Examination		Year of passing	AG	GREGATE MA	RKS	Main Subjects / Specialization	Duration	Board/ University
(with complete name of course passed)	Write name of Examination passed		Max. Marks	Marks obtained	%age of marks		of course (in months)	
High School (Class X)								
Intermediate (Class XII)								
Graduation (Name of Course)								
Post-Graduation (Name of Course)								
Others if any (Specific)								

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

Name of Examination (with complete name of course passed)	Write name of Examination passed Pear of		AGGF Max. Marks	REGRATE MA Marks obtained	ARKS %age of marks	Main Subjects /Specialization	Duration of course (in years)	Board/ University
JBT/B.El.ED/D.ED(specify)								
B.ED								
MBBS/Degree/Diploma in Nursing								
Other if any(specify)								

13. Experience (Attach separate sheet, if columns are insufficient)

	Post held	Name of Institution	Period of service		No. of completed	Class		Scale of pay
			From	То	years & months	taught	Subjects taught	and salary per month
14.	Are you able to teach through English and Hindi, both? YES/NO							

15. Do you have knowledge of computer application?	YES/NO
16. Is any relative/blood relation serving in KVS? :	
If Yes: Name of relative/ blood relation serving in KV	′S:
Designation: Na	me of KV/Office:

UNDERTAKING

I hereby certify that all the information given above is true and correct to the best of my knowledge. I have self-attached attested copies of my testimonials in support of the entries made above. I also agree that mere eligibility does not confer right to be called for interview/selection. My candidature may be cancelled in case any information is found to be incorrect on verification.

Place	Signature
Date	Name of candidate
	(For Office Use Only)

As per KVS norms found

Remarks:

Name & Designation of the Checker -

Eligible / Not Eligible

Signature of the Checker: