



APPLICATION FORM

Post Applied for:	PGT / TGT / PRT	
Subject:		
	Personal Information ;Applicant's PhotographJ	
Name (in block letters) Ms/Mr), ₍ , ₍	
Date of Birth		
Father's /Mother's Name		
Age(in yrs/months)		
Marital Status		
Spouse's Name		
Spouse's Occupation		
Residential Address		
Telephone Number(s)	Landline:	
	Mobile:	
Email Address		

Academic Qualifications*									
	Marks %	Board/ University		ool/College	Subjects / Specialization If any	Year			
XII									
Graduation									
Post Graduation									
B.Ed/M.Ed									
Any Other									
* Attested photoc shortlisted candida		ional qualifications and (experienc	e testimonials to	be submitted at the time of interv	iew (for the			
Details of Experience									
Name of Institution		From Month -Yea	ar To	Month- Year	Subject(s)&Classes Taught				
		Details of	f Work	shops Atte	ended				
Details of Extra Curricular Activities									
Dotails of Extra Outricular Activities									
Signature				Da	te				
J				_ _					