S.No.....



Affix your passport size photograph here.

			// FOR TEAC		SIAFF	
	S	ESSION :	2020		_	
	Post applied	d for :				
	(To be fi	lled in ca	ndidate's han	dwritin	g)	
		SEC	CTION-A			
Name N	//r./Mrs./Ms. :					
Date of	birth :		Pr	esent Ag	ge:	
Nationa	ality ·					
	·					
Marital	Status :					
Numbe	r of children and the	eir details:				
S.NO.	NAME	GENDER	DATE OF BIRTH AND AGE	CLASS	SCHOOL/ CO	LLEGE
Eathor/	Spausa Nama :					
rather	Spouse Name:					
Occupa	tion of father/spous	e:				
Home A	address for correspo	ndence: _				
	one/mobile number:					
	I:					
	ent Address:					

13. Academic	Qualificat	ions					
EXAMINATION	YEAR OF PASSING	SUBJECTS	SCHOOL/BOARD/ COLLEGE/ UNIVERSITY	MARKS (%)	MEDIUM OF INSTRUCTION	REGULAR	DISTANCE
Secondary							
Sr. Secondary							
Graduation							
Post- Graduation							
Any Other							

12. Any major ailments/health concerns. If yes, please give details:

14. Professional Qualification

QUALIFICATION	YEAR OF	SUBJECTS	COLLEGE/	MARKS	MEDIUM OF	MC	DDE
QUALIFICATION	PASSING	SOBJECTS	UNIVERSITY	(%)	INSTRUCTION	REGULAR	DISTANCE
NTT							
B.Ed.							
M.Ed.							
Any other							

15.	CTET Qualification: Please provide the relevant information (applicable for post of PRT
	and TGT)

CTET PAPER	YEAR OF PASSING	MARKS (%)
Paper 1		
Paper 2		
rapei z		

16.	Knowledge of foreign language if any :
17.	Names of two books recently read with name of authors:
18.	Computer Proficiency: tick the applicable boxes.
	o MS Excel
	MS Word
	MS Power Point
	o MS Publisher
	 MS Team/Zoom/Google Meet
	o Any Other
19.	Please mention the strategies you will utilize if given a Class of:
a.)	Students with special learning needs:
b.)	Exceptionally gifted students:
,	

	ns/Appreciation ce	rtificates/schola	rships received, if
DETAILS OF AWARD/FELICITATION	AGENCY	YEAR	DETAILS (AREA OF WORK
Co-curricular activities (P which you can train stude			Music, Dance etc.
	ents / Any other act	vity: 	
	ents / Any other act	vity:	
	ents / Any other act	vity:	
Literary activities (Debate Magazine, Event Comper	e, Creative writing, I	lewsletters, Qui	

	tion in Clubs/Committ ctivities and the level (_
ACTIVITY	ORGANIZED BY	YEAR	ACHIEVEMENT
etails of any even	t/exchange program t	nat you initiate	d/organized/ mana
	search papers/magazi	ne articles/ blo	gs/ e-publications a
	search papers/magazi	ne articles/ blo	gs/ e-publications a
oy you:			gs/ e-publications a
oy you:	search papers/magazi		gs/ e-publications a
Any action research		mented:	gs/ e-publications a

32.		ise gi catio		wo references (other than r	relatives) from	n the field of	
	A.)	Nan	ne:		Designation:			
		Pho	ne:		Email id:			
		Offi	cial address: _					
	B.)	Nan	ne:		Designation:	·		
		Pho	ne:		Email id:			
		Offi	cial Address: _					
33.	Are	you a	a parent with (us? If yes, pleas	se give detai	ls:		
								
								
34.	Are	you a	an alumnus of	the school?				
	(Ful	l Sign	ature of the A	pplicant):				
35.	Det	ails o	f teaching exp	erience (To be	filled by app	olicants with to	eaching experi	ence) :
INS	IAME O STITUTI H ADDI	ON	NO. OF YEARS AND MONTHS, FROM TO	DESIGNATION AND BRIEF DESCRIPTION OF DUTIES HELD	CLASSES & SUBJECT TAUGHT	WHETHER PERMANENT/ TEMPORARY	TOTAL EMOLUMENTS DRAWN/GRADE	REASON FOR LEAVING

				I	I		
i		ous Professiona ons/agencies (N	•				_
-		SHOP/SEMINAR/ NING ATTENDED	AGENCY		DETAILS	DURATI	ON
-							
-							
-	Details (of any COE Web	inar conducte	d as a resou 	rce person (attach the cert	ificates)
-							
	Details (teachinរ	_				ouldered by you	
-	Details (of educational to	ours/study vis	its organized	d by you:		
-							
II S	Signatur	e of the Applica	nt):				

<u>SECTION-B</u> (Medical History)

	Have you undergone any major surgery in last 05 years? (Mention the details, if any).
	Have you been treated for any major ailment in last 05 years?
	Please attach a self-attested certificate stating that no case or complaint has been lodged against you under POCSO Act/Corporal Punishment/Abuse. (Copy attached)
	Please attach copies of relevant documents (mark sheets, experience certificates, training certificates, citations etc.)
cl	aration:
rm ar a	eby certify that all statements made, and information given by me in this application are true, complete, and correct to the best of my knowledge and belief. In the event my information or part of it being found false or incorrect before or after the interview ppointment, action can be taken against me by the School and my candidature/pintment shall automatically stand cancelled/ terminated.
ace	e:
ate	:

TO WHOMSOEVER IT MAY CONCERN

I	, certify that no case or complaint has been lodge
against	me under POCSO Act/Corporal Punishment/Abuse.
Name	:
Sign	:
Date	