

KENDRIYA VIDYALAYA MATHURA CANTT - 281001
WALK IN INTERVIEW FOR THE SESSION 2023-24
APPOINTMENT OF CONTRACTUAL TEACHER/EMPLOYEE

Application for the Post of _____

Name of the Candidate	: Mr./Ms./Mrs. _____ (Attach Copy of Photo ID)	<div style="border: 1px solid black; width: 100%; height: 100%; display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid black; width: 80%; height: 80%; margin: auto;"> <p style="text-align: center;">Photograph</p> </div> </div>
Date of Birth	: _____	
Married/Single	: _____ Blood Group _____	
Father's/Husband's Name	: Mr. _____	
SC/ST/OBC/MUSLIM/MINORITY/GEN	: _____ (Attach Self Certified copy)	
PAN No.	: _____ (Attach Self Certified copy)	
AADHAR No.	: _____ (Attach Self Certified copy)	
Bank Account No	: _____ (Attach Self Certified copy of First Page of Passbook)	
Name of Bank	: _____ IFSC Code _____	
Correspondence Address	: _____ _____	
Permanent Address	: _____ (Attach Self Certified copy of Address Proof)	
E-mail Address	: _____	

Mobile No. (Self): _____ WhatsApp No. (Self): _____

Mobile No. (Close family Member to be contacted in emergency): _____

Academic Qualification (Starting from High School Level)

(Please give information as applicable. (Attach attested Copies of Mark sheets and Certificates))

Name of Examination (with Complete Name of Course Passed)	Name of Examination Passed	Board/ University	Year of Passing	Duration Of Course (in Months)	Subjects / Specialization	AGGREGATE MARKS			Remarks
						Max. Marks	Marks obtained	%age of Marks	
High School (Class X)									
Intermediate (Class XII)									
Graduation (Name of Course)									
Post Graduation (Name of Course)									
Others, if any (Specify)									

Professional Qualification (Attach attested Copies of Mark sheets and Certificates)

Name of Examination (with Complete Name of Course Passed)	Name of Examination Passed	Board/ University	Year of Passing	Subjects / Specialization	Duration of Course (in months)	AGGREGATE MARKS			Remarks
						Max. Marks	Marks obtained	%age of Marks	
CTET									
JBT/B.El.Ed/D.Ed. (specify)									
B.ED	Theory								
	Practical								
BE/B.Tech(CS)/ Degree/Diploma in Nursing									
Others, if any (specify)									

Signature of Candidate.....

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Whether the Candidate has previously worked in this Vidyalaya : YES/NO
(If yes, specify Post and Year) _____

Do you have proficiency in Working Knowledge of Computer Application : YES/NO
(If yes, specify Detail) _____

Do you have proficiency in teaching in English and Hindi Medium _____
Experience:

S. No.	Post Held	Name of the Institution	Recognized/ Unrecognized	Period		No. of Years/Months Completed	Sub & Class Taught
				From	To		
1.							
2.							
3.							
4.							
5.							
6.							

Any Special Achievements : _____

A Short note regarding Suitability to the Post (***Mandatory**)

DECLARATION

I hereby certify and declare that:

- i). I am an Indian National.
- ii). I have read the provisions given in the Advertisement.
- iii). 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 of any information or part of it being found false or incorrect before or after the exam./interview or appointment, action can be taken against me by the KVS and my candidature/appointment shall automatically stand cancelled/repatriated/terminated. If anything is found false, I will be held fully responsible.
- iv). I further declare that I fulfill all the conditions of eligibility regarding age, educational, professional/technical qualifications, etc. prescribed for the post applied for the essential qualifications prescribed are possessed by me, the proof of which has been enclosed.
- v). I understand that income tax (TDS) will be deducted as per the rules of the Income Tax Department, Government of India.
- vi). No case is registered in any Police Station/Court or disciplinary action is pending/ contemplated against me at the time of submission of this application.
- vii). I will have no claim or right for appointment on regular basis nor will be part of cadre of teachers of Kendriya Vidyalaya.
- VIII) I will sign agreement at the time of appointment as per KVS rules.

DATE : _____

SIGNATURE OF THE CANDIDATE _____

PLACE: _____

NAME OF THE CANDIDATE _____

SIGN OF CHECKER (WITH DATE) _____

NAME OF THE CHECKER _____

DESIGNATION _____

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SELF – DECLARATION

I hereby declare that I don't have any of the below listed symptoms.

Cough

Fever

Cold/Runny/Nose

Breathing Problem

I'm certifying that I've NOT been identified as a potential carrier of the COVID-19 virus. I also understand that the health and wellbeing of our community is our first priority; therefore Kendriya Vidyalaya Mathura Cantt reserves the right to deny entry to its premises.

Candidate Name:

AADHAR No

Post.....

Date of Interview:

Address:

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Signature of candidate:

The Candidate must fill up the above self-declaration and keep the same with him/her. He/ She must show the declaration at the time of entry in Kendriya Vidyalaya Mathura Cantt, if asked for.