## **KENDRIYA VIDYALAYA PARADIP PORT**

## Application form for part time contractual teachers for the session 2024-25

1.	Doct a	applied for		•						
		(In block l							Paste Your Self	
		-	nd's Name						Attested	
		-							Passport Size	
	4. Date of birth (attach proof) : 5. Category : SC/ST/OBC/GEN/PH								Photo Here	
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					-,-					
								•••••		
7. /	۹adha	ar Numbe	r :							
8.	8. Contact No. : 1- 2-									
9.	E-mai	il ID	:							
10.	Natio	nality	:			Sex (Ma	le/Female):			
11.	Educa	tional Qua	lification (Attach o	ne set of	self-attes	ted Photocop	oies of the Ce	rtificates	s)	
SI. No	o. N	IAME OF TI	HE EXAM PASSED	YEAR	BOARD/UNIVERSIT		SUBJECTS OFFERED		% MARKS	
1	1	0+2								
2	G	RADUATIO	N							
3	P	OST GRAD	UATION							
4	С	.T./B.Ed. /[	D.Ed.							
5	О	THER QUA	LIFICATION							
			Qualified (Yes/No)		_		cained in CTE	Γ: P-I / P-	·II	
		•	ach attested copies	-				1		
SI. No		ost Held	Name of the	e Institut	ion	From	То	Durati	on(In months)	
1.										
2.										
3.										
				SFLE	DECLARA	TION				
	l,				DECERNA		hereby de	eclare th	at the above	
partic		are true ar	nd correct to the b				•			
•			on contractual ba	,	•	_				
			n is found to be inc				•		,	
	,					,				
Date:					Signat	ure of applica	ant:			
Place:										
				FOR C	FFICE USI	E ONLY				
The de	ocum	ents and co	ertificates are veri	fied with	the origin	als and foun	d correct.			
Verifie	ed by	:			Che	ecked by :				
Signature :										
Name				Name and post:						
Rema	rks if A	Any:								
Docui	ment	s Enclosed	d: 1. Self-attested	Copy of	Proof of	Identity (Aa	dhaar) -	YES/N	10	
			2. Self-attested			-	, -	YES/N		
			3. Passport size				_	YES/N		

4. Self-attested Copy of Educational Qualification - YES/NO

## **KENDRIYA VIDYALAYA PARADIP PORT**

## Application form for part time contractual Nurse for the session 2024-25

1.	Post applied for	•								
	Name (In block let	ters)					Paste Your Sel			
	Father's/ Husband	•					Attested			
	Date of birth (atta	Passport Size								
	Category : SC/ST/OBC/GEN/PH									
				•••••	•••••	••••••	••••••			
				•••••						
7.	Aadhaar Number	:								
8.	Contact No. : 1- 2-									
9.	E-mail ID	:								
10.	Nationality	:			Sex (Mal	e/Female):				
1.	Educational Qualif	fication ( <b>Attach o</b>	ne set of	self-attes	ted Photocop	ies of the Co	ertificates)			
SI. N	o. NAME OF THI	NAME OF THE EXAM PASSED			YEAR BOARD/UNIVERSITY SUBJECTS OFFER					
1	Matriculation	/Class X								
2	10+2									
3	Diploma in N	ursing								
4	MBBS									
5	OTHER QUAL	IFICATION								
			-	-						
12.	Whether Registra	tion in MCI ( <b>Yes/</b>	No):		Registrat	ion No. wit	h Validity:			
13.	Experience (Attac	h attested copies	of expe	rience cer	tificates):					
SI. N		Name of th	ne Institu	tion	From	То	Duration(In months)			
1.										
2.										
			-	DECLARA						
••.						•	eclare that the above			
				,	•		nd that the vacancies for			
	e any information					-	dature may be cancelled			
II Casi	e any information	is found to be file	LOTTECT OF	i verilicati	ion at any time	c.				
Date:				Signat	ure of applica	nt·				
Place:				Jigilat	are or applica					
iacc.	'									
			FOR O	FFICE USI	E ONLY					
Γhe d	ocuments and cer	tificates are veri				l correct.				
√erifi∉	ed by :			Che	ecked by :					
Signat	-									
_	and post:	Name and post:								
Rema	rks if Any:									
Docu	ments Enclosed:	1. Self-attested	Copy of	Proof of	Identity (Aad	dhaar) -	YES/NO			
		2. Self-attested	Copy of	Proof of	Address	-	YES/NO			
		3. Passport size	Photogr	raph		-	YES/NO			
		<ol> <li>Passport size</li> <li>Self-attested</li> </ol>	_	•	onal Qualifica	- tion -	YES/NO YES/NO			