# **ACHIEVERS' CLASSES**

## **APPLICATION FORM**

Name o	f the Post:					
Applicant Name:					Photogr	aph
Father's	s Name:					
Date of Birth:					Identity Proc	of No:
Age as on 01.01.2023:					Sex:	
Present Contact Address:					Permanent Contact Mobile No:	
Permanent Contact Addr		ess:				
Email Address:						
Language Spoken / Writte		en:				
Professional Qualification Details:						
Professi	ional Qualification	n Details:				
Professi SL. No.	Exam passed	Name of Board /University	Name Of the Institution	Full mark	Mark obtained	% Of Mark
SL.		Name of Board		Full mark		
SL.		Name of Board		Full mark		
SL.		Name of Board		Full mark		
SL.		Name of Board		Full mark		
SL.		Name of Board		Full mark		
SL.		Name of Board		Full mark		

#### **TEACHING EXPERIENCE:**

SL No.	Name Of the Organisation	Designation	No. Of Years
1			

Hobbies:
Marital Status:
DECLARATION:
I hereby declare that all the above mentioned information is true as per best of my knowledge.
Date:
Place:

### Note:

#### The following documents are to be attached with the application form

- 1. Two passport size recent Photographs, one is duly affixed of the resume.
- 2. Self attested Photocopy of passed certificate and mark sheets of essential qualification and preferential qualification as per requirement of the post.

Signature

- 3. Self attested photocopy of experience certificates if any.
- 4. Self attested photocopy of identity proof like Voter-identity card / Aadhar card / Pan Card.