

EKLAVYAMODELRESIDENTIALSCHOOL,DIST NABARANGPUR (EMRS HIRLI)

(UNDER NATIONAL EDUCATION SOCIETY FOR TRIBAL STUDENTS)

(An Autonomous Organization under Ministry of Tribal Affairs , Govt of India)

APPLICATION FORM FOR GUEST FACULTY

IMPOTANTNOTES: 1.All entries should be made in capital letters

2. On form should be used for one Post

3. Enclose self attested copies of testimonials with each form

1. POSTAPPLIED FOR							2. SUBJECTAPPLIEDFOR													
(Please Indicate whether PGT/TGT PET Male/PET Female in the box)							Incase	e of P	GT/TG	Т										
3.Ca	ndida	ate'sN	lame(Incap	itallet	ters)(Pleaseke	eponebo	oxblank	petween	Firstnam	e,Midd	leName8	Lastnan	ne)		1	r	1	
4.Father's/Husband'sName(Incapitalletter) (PleasekeeponeboxblankbetweenFirstname,MiddleName&Lastname))			Father				Hus	band							
5.Da	teof E	Birth			AY]	MO	NTH]		YE	AR		6.Ge	ender	Μ]	F	
7. Ageas on31.03.2025 Year Month				Da																
			dress	Incap	itallet	ters)								1						
a. Name b. Father's/Husband'sName c. Address													onerec aph he							
e. f.	• •	' Town ileNo. il.ID]											
																Signat	ureof	Candi	dates	

9. AcademicQualification(StartingfromHighSchool Level)

 $\label{eq:plasegive} Please give information as applicable. (attachattest edcopies of mark sheets and certificates)$

	Yearofp	Nameof	A	ggregateMark	S	Subjects	DurationofCo		
NameofExamination	assing	Degree	Max.Marks	Marks Obtained	U		urse(inmonth)	Board/University	
High School (Class X)									
Intermediate (ClassXII)									
Graduation (NameoftheC ourse)									
Postgraduation (Nameof Course)									
Othersifany (Specify)									

10. ProfessionalQualification(AttachattestedcopiesofmarksheetsandCertificate)

		Write name Of Examination passed				Year of	А	ggregate Mark	S		Duration of		
	Name of Examination		passing	Max.Marks	Marks Obtained	% age of Marks	Subjects	Course(in month)	Board/University				
	B.ED/BPED												
CTET													

11. Experience(Attach separate sheet, if columns are insufficient)

Post held	Name of	-	f Service	No of Completed	Class	Subjects Taught	Scale of pay and Salary		
	Institution	from	То	Years &months	tought	, ,	Per month		
12. Are you	12. Are you able to teach through English and Hindi ,both?(For teaching Post) Yes No								

13.	Do	you	have	knowledge	of	computer	applicat	ion	?
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Yes		
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No

UNDERTAKING

I hereby certify that all the information given above is true and correct to the best of my knowlwdge. I have attached self attested copies of my testimonials in support of the entries made above. I also agree that mere eligibility does not confer right to be called for interview/ selection. My candidature may be cancelled in case any information is found to be incorrect on verification.

Place:

Date:

Signature: _____

	FOROFFICEUSE	FORMNO:
ELIGIBLEORNOT ELIGIBLE:		
VERIFIEDBY:		
NAMEWITH DESIGNATION:		