NETARHAT VIDYALAYA SAMITI
NETARHAT

APPLICATION FOR THE POST OF_____

(To be filled in by the candidate in his/her own handwriting in

BLOCK LETTERS with Blue/Black ink ball pen)

1. **Post Applied for:-** _____

2. **Subject (For Teachers only):-** _____

3. **Candidates Name:-**_____

4. **Father's/Husband's Name**:-_____

5. **Permanent Address**:- _____

   _____

   _____

   _____

6. **Communication Address**: _____

   _____

   _____

   _____

7. **Contact No:-**_____

8. **Email-id:-**   _____

9. **Date of Birth:-** _____
   (In words)   _____

10. **Age as on 01-01-2015**:- _____

11. **Gender: Male/Female**:- _____

12. **Category: UR/SC/ST/OBC**:- _____

13. **Educational Qualification**: (Starting from 10th Board) (Attached duly attested copies of Certificate as proof)

S.No	Exam Passed	Name of Board/University	Subjects	Year of Passing	% of Marks	Division/ Class

14. **Details of Employment/Experience** (Starting from the most recent)

Name of Organization	Post held	From (DD/ MM/ YY)	To (DD/ MM/ YY)	Total Work Experience (In years and months)	Total Emoluments/ Compensation	Nature of Duties (Permanent/Adhoc/ Temporary/Contract

15. **Do you possess the essential qualification and experience as on closing date of receipt of application**.
(Tick Mark)   Yes   No

16. Attach a separate sheet elaborating desirable qualifications, testimonials, if any

17. **List of documents attached with the application form** (only duly attested copies of relevant certificates)

18. Declaration:

(a) I hereby certify that all statements made in this application are true. Complete and correct to the best of my knowledge and belief and have filled in my own handwriting.

(b) I have also enclosed duly attested and legible copies of all relevant documents/ certificates.

(c) I understand that in the event of information being found false or detected incorrect or incomplete at any stage or any ineligibility being detected, my candidature/selection/ is liable to be cancelled/terminated automatically without any notice served to me and in addition to any other action that may be taken against me.

Date:

Place:

Signature of the Candidate

Note: All the signatures done on the application Form should be in running script (Not in BLOCK LETTERS) and in the same language and style.