## SAINIK SCHOOL NALANDA (BIHAR) APPLICATION FOR THE POST OF

1.	Nam									
2.	Fath	РНОТО								
3.	Perm									
4.	Corre		S:							
5.	Category : ST/SC/OBC/GEN/EX-SERVICE 6. Nationality:									
7.	Cont (a) (b) (c)	(b) Mobile No								
8.	(a)	Date of Birth	:	Date	Month	Year				
	(b)	Age as on 23 Jan 2015	:	Years	Months	Days				
9.	Marit	al Status	:	Married/Single						

## 10. **Qualifications**:

Class	Medium of Instruction	Subjects Studied		Month & Year of completion	Name of School/College	University	%age in Main	Division
		Main	Ancillary				Sub	
10 <sup>th</sup>								
12 <sup>th</sup>								
Graduation								
Post								
Graduate								
B Ed								
CTET								
STET								
Any Other								

11. Experience: (Attach separate sheet, if columns are not sufficient).

Ser No	Name of the Institution and address	Appoint ment (s) held	Classes Taught, eg. VI to VIII, VI to X or VI to XII	Peri	iod of se	ervice	Day/ Reside ntial School or Organis ation	Nature of Appoin tment (Temp/ Adhoc/ Perman ent)	Salary drawn (all incl) per month (Rs)
				From (MM/ DD/ YY)	To (MM/ DD/ YY	Total period (Yrs & Months			

					YY)	YY	Months	ation	Perman ent)	(KS)
12.	Proficiency i	n Com	puter:							
13.	Proficiency i	n Gam	es/Co-cu	rricular act	tivities. (A	ttach sep	parate shee	et, if colum	ns are not	sufficient).
Ser No	Game			Remarks						
NO	Co-curricular		School	/Zonal/Re	gional	onal College		ersity	State	_
14.	Hobbies:									
15.	Details of In	-service	e training	attended (	(If any): _					
16.	NCC: (a) Certificate obtained: <u>A/B/C</u>									
	(b)	Cam	nps attend	ded:						
17. Rajgir	Applicable for Branch, Code	•		aft only in	favour of	the 'Prin	cipal, Saini	ik School N	Nalanda, p	ayable at SBI
	(Candidates capital lette							nd comple	ete Mailin	g Address ir
	DD No					Rs 300	/- (Rs 150/	for SC/S	Γ)	
	Date			Dr	awn on					
18.	Any other details:									
	I hereby ce	artify th	at the al	nove narti	CERTIF		and true	in all rest	nects to t	ne best of my
knowle	edge and beli		at the di	Joro parti	calaio ai	5 5511660	. and true	απ 100	2000 10 11	.5 5550 01 111
Place:								(Sid	nnature of	Applicant)

Place:	(Signature of Applicant
Date:	