

SAINIK L P SCHOOL KAZHAKOOTAM
APPLICATION FORM FOR THE POST OF
LP SCHOOL TEACHER

1. Full Name : _____
2. Father's Name : _____
3. Permanent Address : _____

4. Address for Correspondence / Present Address : _____

Affix recent passport
size photograph

5. Date of Birth	:	____/____/____	6. Sex	:	Male <input type="checkbox"/>	Female <input type="checkbox"/>								
7. Marital Status	:	_____	8. Nationality	:	_____									
9. Religion	:	_____	10. Category		<table border="1"> <tr> <td>GEN</td> <td>SC</td> <td>ST</td> <td>OBC</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>		GEN	SC	ST	OBC				
GEN	SC	ST	OBC											
11. Domicile (State)	:	_____												
12. E-mail id	:	_____												
13. Telephone No. with STD Code	:	_____												
14. Mobile No.	:	_____												

GEN	SC	ST	OBC	OTHER

15. . Educational qualifications (Matriculation onwards)

[illegible]

16. Any other qualifications (including extra-curricular activities if any)

17. Experience:

Name of the Organisation	Designation	Nature of duties	Period		Duration	Reason for leaving
			From	To		

Declaration : I hereby declare that all statements made in the application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found untrue / false / incorrect or I do not satisfy the eligibility criteria, my candidature will be cancelled, without assigning any reasons thereof and the DD will stand forfeited. I have read the contents of the advertisement and agree to abide by the rules, regulations and procedures for appointment to the post applied for.

Date :

Place :

(Signature of Applicant)

IDENTITY CERTIFICATE

(TO BE PRODUCED AT THE TIME OF WRITTEN TEST / INTERVIEW)

Affix photograph

Seal of office & Signature of
the Officer attesting this
certificate should appear on
the Photograph without
covering the face

This is to certify that the details and photograph of Ms / Mr _____
S/o /D/o _____ and resident of (R/O)

_____ is
who has applied for the post of _____
verified and certified as correct and genuine.

PERMANENT ADDRESS:

PRESENT ADDRESS:

Signature of the Candidate : _____
Signature of the Certifying Officer : _____
Name of Certifying Officer : _____
Phone No. of Certifying Officer : _____

Designation : _____
(Seal of Office)

[Note : Identity of the Candidate should be certified by an Officer not below the rank of Tehsildar / Sub-Divisional Officer of the candidate's domicile place / native place, Principal of the school / college from where the candidate has passed his 10th Standard, Intermediate or Graduation / Diploma along with name, designation and seal of office.]