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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **APPLICATION FORMAT** | | | | | | | | | | | | | | | | | | | | |
| APPLICATION FOR THE POSITION OF | | | | | |  | | | | | | | | | | | | | | |
| **AT: CCI Prachina Bharatiya Bidya Sabha, Gurukul Ashram, Amsena, Nuapada** | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| 1. | Name of the Applicant | | | | | | : |  | | | | | | | | | | | | |
| 2. | Father’s Name | | | | | | : |  | | | | | | | | | | | | |
| 4. | Spouse’s Name | | | | | | : |  | | | | | | | | | | | | |
| 3. | Date of Birth [Both in Figure & Words] | | | | | | : |  | | | | | | | | | | | | |
| 4. | Address [For Correspondence] | | | | | | | | | | | | | | | | | | | |
|  | Village/ AT: |  | | | | | | | | | | Land Mark (If any): | | | | | | |  | |
|  | POST: |  | | | | | | | | | | District: | | | | | | |  | |
|  | State: |  | | | | | | | | | | PIN: | | | | | | |  | |
| 5. | Proof of Identity | | | [Voter Id/ Aadhar Card/ PAN Card] | | | | | | | | | Card Number : | | | | |  | | |
| 6. | Educational Qualification: | | | | | | | | | | | | | | | | | | | |
| Sl. No. | Name of the Examination | | | | Name of the Board/ Council/ University | | | | | | Year of Passing | | | | Total Marks | | Marks obtained | | | % of marks obtained |
| 1. | H.S.C/ Equivalent | | | |  | | | | | |  | | | |  | |  | | |  |
| 2. | 10+2/ Equivalent | | | |  | | | | |  | | | |  | | |  | | |  |
| 3. | Degree | | | |  | | | | |  | | | |  | | |  | | |  |
| 4. | Post Graduate | | | |  | | | | |  | | | |  | | |  | | |  |
| 5. | Computer Skill | | | |  | | | | |  | | | |  | | |  | | |  |
|  |  | | | |  | | | | |  | | | |  | | |  | | |  |
| 7. | Experience, if any | | | | | | | | | | | | | | | | | | | |
|  | Name of the Establishment/ Unit | | | | | | | | From | | | | | | | To | | | | Total |
| A. |  | | | | | | | |  | | | | | | |  | | | |  |
| B. |  | | | | | | | |  | | | | | | |  | | | |  |
|  |  | |  | | | | | |  | | | | | | | | | | | |
| 8. | Contact No.: | |  | | | | | | E-mail: | | | | | | | | | | | |
| *Paste one recent attested*  *colour photograph (3.5 X 4.5 cm)*  *here& sign across* | | | | | | | | | *Full Signature of the Candidate*  *with Date & Place* | | | | | | | | | | | |