

SAINIK SCHOOL KALIKIRI APPLICATION FORMAT

01.	Post Applied for	:
02.	Name	:
03.	Date of Birth & Age	: DOB: AGE:Years
04.	Sex	:
05.	Name of the Father	:
06.	Marital Status	:
07.	Nationality	:
08.	Caste Category	:(Mention - General / SC / ST)

Affix pass port size photograph

- Qualifications (Fill up columns as applicable) starting from 10th or equivalent 0
- 9

Sl.	Qualification	Subjects	Institution / Board / University	Year of Passin g	Division and %
(a)					
(b)					
(c)					

(d)						
(e)						
(f) Any Other Qualifications (including extracurricular activities, sports/NCC etc if any)						

10 consideration)

Ser	Designatio n	Name of Institution / Organisation	Brief Experience / Duties	Perio d	
			performed	From	То
(a)					
(b)					
(c)					
(d)					
(e)					

11.	Languages Known	:			
	Correspondence Address	:			
13.	Permanent Address	:			
	Mobile Number	:			
15.	Email ID	:			
16.	Details of Application Fee				
		: Name of Bank			
		DD No:	Date:	Rs	
17.	<u>Declaration</u>				
	(a) I hereby declare of my knowledge.	that all the inform	ation furi	nished above is	true to the best
	(b) I hereby submexperience and caste in	it self attested a case of SC/ST).	copies	of certificates	(qualifications,
	(c) I am fully aware certificates and during that there has been sugandidature would be leading.	my service that opression of actua	false info l informat	rmation has be	en furnished or cation form, my
Place:	:			(Signature of t	he Candidate)
Date:				Name:	