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| **CURRICULUM VIATE INFORMATION FORM** |
| **Post Applied for** |  |
| **PERSONAL DETAILS** |
| **Full Name** |  |
| **Father’s Name/ Husband Name** |  |
| **Gender** |  |
| **Category (Gen/SC/ST/ OBC)** |  |
| **Present Address** |  |
| **Permanent Address** |  |
| **Telephone No. (Resi. And Official) / Mobile** |  | **Aadhaar No.** |  |
| **Pan No.** |  |
| **E-mail** |  | **Date of Birth** |  |
| **Nationality** |  | **Marital Status** |  |
| **EDUCATIONAL QUALIFICATION (STARTING FROM MATRICULATION TO THE LATEST. ADD HIGHER QUALIFICATION, IF POSSESSED)** |
| **Degree/ Qualifications obtained** | **Passing Year** | **Name of Board / University** | **Name of the College**  | **Regular/ Corres pondence /Open**  | **Subject**  | **%age/ CGPA/ Grade** |
| **X** |  |  |  |  |  |  |
| **XII** |  |  |  |  |  |  |
| **B.A / B.Sc / B.Com / B.Tech** |  |  |  |  |  |  |
| **B.Ed** |  |  |  |  |  |  |
| **Higher Qualification** |  |  |  |  |  |  |
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| **Additional Training / Courses (Explain how this helped you in your profession below)** |
| **Name of Course** | **Passing Year** | **Name of University / Institute** | **Percentage / Grade / CGPA** |
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| **WORK EXPERIENCE (Starting with your present post, list in reverse order every employment you have had)** |
| **FROM (Month/Year)** | **TO (Month/Year)** | **Nature of Job** |  |
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| **Language Skill (List mother tongue first)** | **Ability to read** | **Ability to write** | **Ability to speak** |
|  | **Very Good** | **Good** | **Weak** | **Very Good** | **Good** | **Weak** | **Very Good** | **Good** | **Weak** |
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| **HOBBIES, INTEREST OR ACTIVITIES** |
| **List hobbies, sports and leisure activities** |
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| **REFERENCES (List two person not related to you, who are familiar with your character and qualification and may be contacted for a reference)** |
| **Name** |  | **Name** |  |
| **Govt. Servant/ Private Company/ Business/ Professional (Please give Name and Full Official Address)** |  | **Govt. Servant/ Private Company/ Business/ Professional (Please give Name and Full Official Address)** |  |
| **Designation** |  | **Designation** |  |
| **Residential Address** |  | **Residential Address** |  |
| **Contact No. (Mobile and Tel. No.)** |  | **Contact No. (Mobile and Tel. No.)** |  |
| **E-mail** |  | **E-mail** |  |
| **I certify that the statement made by me in answer to the foregoing questions are true, complete and correct to the best of my knowledge and belief.****Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature****Date:**  |
| **NOTE: You are required to provide original documents to the statements you have made above. However, please attach self-attested documented documents only with this proforma. If need be, additional sheet may be used.** |