



SAINIK SCHOOL KORUKONDA

Vizianagaram (Dist), Andhra Pradesh
(Under the aegis of MoD)

E-Mail: sskorukonda@sainikschoolociety.in

Website: www.sainikschoolkorukonda.org



APPLICATION FORM

*Affix a recent
Colour
Passport size
Photograph*

1. **Post Applied For** :
2. **Name of Candidate** :
(as per Class X Certificate)
3. **Date of Birth (DOB)** : / /
(as per Class X Certificate)
4. **Age** : Years Months
5. **Gender** : Male ☐ Female ☐ Other
6. **Name of Father** ☐ **Husband** ☐ :
7. **Marital Status** : Married ☐ Unmarried ☐ Other
8. **Category** :
9. **Educational Qualification starting from 10th or equivalent:**

Sl. no	Qualification	Subjects	Institute/Board/University	Year of Passing	Division	%
9.1	10 th /HSCE					
9.2	12 th /Higher Secondary					
9.3	Graduation					
9.4	Post-Graduation					
9.5	B.Ed					
9.6	P.hD/M.Phil					
9.7	Others					

Note: All necessary educational certificates must be enclosed.

Signature of Candidate



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10. Any Other Qualifications (including extracurricular activities, sports/NCC etc if any):

S. No.	Activity / Qualification	Category (Sports/NCC/Cultural/ Volunteering/Others)	Level of Participation (School/College/State/National)	Institution / Organization	Duration	Achievements / Certificates	Remarks
10.1							
10.2							
10.3							
10.4							
10.5							

Note: All necessary other qualifications certificates must be enclosed.

11. Experience (Experience without relevant certificates will not be taken into consideration)

Sl no	Designation	Name of the institution and organisation	Brief experience/Duty Performed	Period		Reason for Leave
				From	To	
11.1						
11.2						
11.3						
11.4						
11.5						

Signature of Candidate



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12. Language Known : Telugu ☐ Hindi ☐ English ☐ Others ☐

13. Mobile No :

13.1 Alternate Mobile No :

14. Email ID : @

15. Aadhar No :

16. Address Details :

16.1 Correspondence Address :

AT: PO:

PS: DIST:

State: PIN:

16.2 Permanent Address :

AT: PO:

PS: DIST:

State: PIN:

17. Details of Application Fee: (Demand Draft may be drawn in favour of 'Principal, Sainik School Korukonda, Payable at SBI, Sainik School Korukonda, Branch Code – 2791).

Name of the Bank: DD No:

Date: / / Amount: Rs.500/-

Declaration

1. I hereby declare that all the information furnished by me in this application form is true, complete and correct to the best of my knowledge and belief. I further declare that I have not concealed or suppressed any material information or facts relevant to my candidature.

2. I hereby submit self-attested copies of all the requisite certificates and documents in support of my educational qualifications, experience, caste/category and other claims, as applicable.

3. I am fully aware that my candidature is subject to verification of the information and certificates / documents furnished by me. If, at any stage, it is found that any information furnished by me is false, incorrect, incomplete or misleading, or that I have suppressed any material fact or information, my candidature shall be liable to be cancelled / terminated without any further notice. In the event of such discrepancy being detected after my appointment, my services shall be liable to be terminated in accordance with the applicable rules, without prejudice to any other action that may be taken against me under the rules.

4. I also undertake to abide by all the rules, regulations and conditions applicable to the post and the service.

Signature of Candidate