

# SAINIK SCHOOL BHUBANESWAR

PO: SAINIK SCHOOL, BHUBANESWAR, DIST KHURDA, ODISHA-751 005

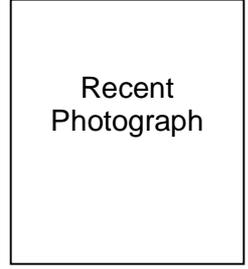
## APPLICATION FOR THE POST OF TGT (ODIA) (CONTRACTUAL)

### (RESERVED FOR OBC CATEGORY)

LAST DATE FOR RECEIPT OF APPLICATION: 16 JAN 2026

1. **Name of Applicant**  
(in CAPITAL Letter) : .....
2. **Father's/Husband's Name:** .....
3. (a) **Date of Birth:**

D	D	M	M	Y	Y	Y	Y
- (b) **Age as on 16 JAN 2026:** ..... Years ..... Months ..... Days
4. **Gender:** ..... 5. **Marital Status:** .....
6. **Nationality:** ..... 7. **Religion:** .....
8. **Category** (GEN / SC / ST / OBC / Ex-Serviceman): .....  
(Please attach OBC-NCL caste certificate)
9. **Aadhaar No.** .....
10. **Addresses:**



**Present / Correspondence Address**

Vill: .....  
PO: .....  
Dist: .....  
State: ..... PIN .....

Mob No: .....  
Email id: .....

**Permanent Address**

Vill: .....  
PO: .....  
Dist: .....  
State: ..... PIN .....

11. **Educational Qualification (Please fill up all the column properly):**

Qualification	Subject	Institution / Board / University	Year of Passing	Division & Percentage of Marks
SSLC / Class X				
Intermediate (+2)				
Degree / Graduation				
B Ed				
CTET / STET				
Post Graduation				
M. Phil / Ph. D				
Any other				

12. **Experience / Present Occupation:**

Ser	Name of Institution and Address	Medium of Teaching & Residential / Non Residential School / College	Post(s) Held	Period of Service		Nature of Appointment (Temp / Adhoc/ Permanent)
				From - To	No of Year & Months	

13. **Proficiency in Computer:** .....

14. **Proficiency in Co-curricular/Extra-curricular Activities:**

Ser	Games/ Co-curricular	Level Played			Remarks
		School/Zonal/Regional	College / University	State	

15. **Details of in-service training attended** (if any): .....

16. **NCC:** (a) Certificate obtained- A/B/C .....

(b) Camps attended: .....

17. **Hobbies:** .....

18. **Application fee:** Candidates are advised to pay the application fee (non-refundable) for Rs 400/- (exempted for Women candidate) through online mode (NEFT, PhonePe, Google Pay) to the Sainik School Bhubaneswar bank account (**Name of the A/C holder: Principal, Sainik School Bhubaneswar, Account No: 450501010028108, IFSC: UBIN0545058, Bank: Union Bank of India, Chandrasekharpur Branch**), attach the **payment screenshot** in their application form and provide the following details:-

Payment Reference / UTR No ..... Date of payment: .....

19. **DECLARATION:**

(a) I hereby declare that all the information furnished above are true to the best of my knowledge and nothing has been concealed and distorted.

(b) I hereby submit self attested copies of certificates (qualifications, experience and caste certificate).

(c) I hereby declare that I have not involved in any Criminal or Police case.

(d) If at any time, I am found to have concealed any material information; my appointment shall be liable to be summarily rejected.

(e) **I am also fully aware that the Contractual appointment is temporary and only for a specific period of appointment and that I will have no right to claim for appointment on regular or on daily wage basis on expiry of the contract term. I also understand that the contract period can be curtailed by the School due to Administrative / Policy reasons.**

Place: .....

Signature of the Candidate

Date: .....

Name: .....

**DETAILS OF SUBJECTS STUDIED AND MARKS OBTAINED IN GRADUATION /  
BACHELOR OF ARTS DEGREE**

FIRST YEAR				
Subject	Paper	Full Marks	Pass Marks	Mark Secured
SUB TOTAL			-	
SECOND YEAR				
Subject	Paper	Full Marks	Pass Marks	Mark Secured
SUB TOTAL			-	
THIRD YEAR				
Subject	Paper	Full Marks	Pass Marks	Mark Secured
SUB TOTAL			-	

Place: .....

Signature of the Candidate

Date: .....

Name: .....

**Note:** If the above format is not found suitable, you may submit the requisite data in your own format.

**DETAILS OF SUBJECTS STUDIED AND MARKS OBTAINED IN  
BACHELOR OF EDUCATION (B Ed)**

FIRST YEAR				
Subject	Paper	Full Marks	Pass Marks	Mark Secured
SUB TOTAL				
SECOND YEAR				
Subject	Paper	Full Marks	Pass Marks	Mark Secured
SUB TOTAL				
THIRD YEAR				
Subject	Paper	Full Marks	Pass Marks	Mark Secured
SUB TOTAL				

Place: .....

Signature of the Candidate

Date: .....

Name: .....

**Note:** If the above format is not found suitable, you may submit the requisite data in your own format.