

**GOVERNMENT OF NAGALAND
DIRECTORATE OF SCHOOL EDUCATION
NAGALAND : KOHIMA**

Paste Passport
Size Photo here

Application Form for in-service Special Education Teacher

Sl.No: _____ (To be assigned by office)

[BLOCK LETTER]

1. **Name of Applicant** :
2. **Father's Name** :
3. **Gender** : (Male/Female)
4. **Date of Birth** :/...../.....
5. **Edu. Qualification** :
6. **Prof. Qualification** :
7. **Have Disabilities** : Yes/No
8. **If Yes, mention percentage and nature of disability** :
.....
9. **Date of Joining** :/...../..... (Enclose Appointment Order)
10. **Place of Posting** :
11. **Mobile No** :
12. **Email ID** :

Declaration

I do hereby certify that all the information provided is true and correct to the best of my knowledge and belief. Furthermore, I confirm that all necessary documents, as specified in the notification, are duly enclosed/attached along with the Appointment Order.

Name and Signature of Applicant

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✂.....

(For Office Use only)

Sl.No : _____ (To be assigned by office)

Name of Applicant :

Issued by

Name and Signature with date :