

## SUBRAMANIAN POLYTECHNIC COLLEGE

## RAYAVARAM – 622 506 PUDUKKOTTAI DISTRICT.

Phone: 04333-272226,272235 E-Mail: principal@sptc.org.in

## **Application Form for Candidates applying for Teaching Positions**

	Post Applied for									
l	Name of the Applicant (in Eletters):	Block								
2	Address for Communication	n :	PIN :							
3	Telephone No / Cell No:									
1	Sex		Male / Female							
5	Date of Birth (Christian Era (Day, Month and year should be only as a two digit number Exam 5-1-2005 should be entered as 05	entered ple:	Day Month Year							
6 (a)	Name of the Community:		ST SC MBC& DNC BC OC							
6 (b)	Caste:									
7	Examinations Passed:									
	SI Name of Examination . N o		University / Correspon Marks Class College dence / Obtai Obtai Regular ned ned							
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8 (a)	Experience:									
		Sl. Name of the Instit		tion		Period		Designation		
	No				F	From	То			
	Teaching									
	Non Teaching									
8 (b)	Subjects		d ·							
0 (0)	Subjects Handled :  Sl.No Name of the Subject			Semeste		Month & Year		Result Produced		
		- Trume of the Subject		Semest				1000001100000		
9	Any other co-curricular activities									
	participated:									
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Date:				Å	Sign	iature c	of Applica	nt/ Candidate		