

APPLICATION FORM

Post applied for:

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Personal Information: *(Fill in capital letters only)*

1. Name in block letters Miss/Mrs./Mr.

2. Date of Birth (in figures):
(DD/MM/YYYY) (in words):

3. Contact Number(s) and address: Mobile No(What's app) :

Address:.....

.....

E-Mail-Id:.....

4. Place of Birth: 5. Nationality:

6. Marital Status: 7. Number of Children:

8. Languages spoken at home (i).....(ii).....(iii).....

9. Name & Occupation of father:

10. Name & Occupation of mother:

11. Name & Occupation spouse:

12. Address and telephone Number

Father/Mother:

Spouse:

13. Details of foreign travel & Year:

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14. Academic Information:

S. No	Qualification	Discipline/ Subjects	Name of School/College/ University	Year of Passing	(Mode) Distance/ Regular	% of Marks	Division
1.							
2.							
3.							
4.							
5.							

15. Professional Qualifications:

16. Work Experience: Total Experience(in years):

Organization	Designation	Year		No.of years
		From	To	

17. Proficiency in Languages(write mother tongue as S.No.1)

S.No	Language	Read	Write	Speak

18. Particulars of the Present employment:

1. Name and full address of present employer with contact number:

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2. Present designation:

3. Date of Joining:

4. Present place of posting:

5. Total emoluments:

Pay in PB	Grade Pay/Level & Cell	Basic Pay	DA	Total	Other Benefits		Gross Total
					HRA	Transport Allow.	

6. Exact period after which you can join if selected:

17. Interest/Hobbies/Co-curricular Activities:

18. Do you suffer from any major ailment medical problems? Yes/No
If Yes, give details:

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19. Have you ever been convicted by any court of law or any disciplinary proceeding/enquiry is against you or any penalty has been imposed upon you.
Yes/No If Yes, details please.

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20. Details of two references(other than relative) in the field of education

Name	Occupation	Address(Official)	Tele. Nos

Declaration:

I thereby certify that the information provided is true and do the best of my knowledge and belief. If any information is found to be false/incorrect it will disqualify me for employment.

(Signature of Applicant)