

JHABBAN LAL D.A.V PUBLIC SR.SEC.SCHOOL

J-Block, Paschim vihar, New Delhi- 110063, Ph- 011-45522816

(Managed by D.A.V COLLEGE MANAGING COMMITTEE,
Chitra Gupta Road New Delhi)

PLEASE AFFIX YOUR
PHOTOGRAPH HERE

APPLICATION FORM FOR TEACHING AND NON TEACHING POST

Application for the post of _____

Pay Scale _____

1 Personal Details (Capital Letters):

- Name: _____
- Address: _____
- Mobile: _____
- Address: _____

- Date Of Birth: _____
- Place of Birth: _____ Religion _____ Category _____
- Efficiency in written and spoken: Good/Fair/Excellent
- English _____
- Hindi _____
- Other language _____

2 Family Details:

- Father's/Husband's name: _____
- Occupation: _____
- Full Address: _____
- Salary: _____

3 Marital Status _____

If married mention number of children and their ages:

4 Academic Qualifications: (Enclose all the attested copies of testimonial)

S.No	Diploma/ Degree	Year of Passing	Name of School/Board	Subjects	Class/ Division&%o f marks	Medium of Instructions
1						
2						
3						
4						
5						
6						

(If space is not sufficient please attach an additional sheet)

5 Experience:

S.No	Name of the organization	Dates From____ To_____	Nature of work/Classe s taken	Subjects taught	Medi um
1					
2					
3					
4					
5					
6					

(If space is not sufficient please attach an additional sheet)

6 Area of Interest/Hobbies: _____

7 Knowledge of Computer: (If yes, tick the checkboxes)

MS Office MS Excel Goggle Tools

Power point

Any Other _____

8 Give details of integrated computer Teaching (ICT) used by you

9 Any other relevant information:

10 If selected, how much time would you need to join: _____

11 Declarations:

I hereby certify that all the statements made and information given by me in this application form are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect before or after the interview or appointment action can be taken against me by the School and my candidature shall automatically stand cancelled/ terminated.

Place: _____

Date: _____

Signature of the applicant

REMARKS IF ANY FOR OFFICE USE ONLY:

SIGNATURE OF INCHARGE _____

