

MODERN SCHOOL

VASANT VIHAR POORVI MARG, NEW DELHI-110057

APPLICATION FOR APPOINTMENT

Post Grade Subject	AFFIX LATEST PASSPORT SIZE PHOTOGRAPH
1. PERSONAL DETAILS	105
NAME SEX DATE OF BIRTH STATE_	
MARITAL STATUS Married Unmarried Divorced S PRESENT ADDRESS (For communication) PERMANENT ADDRE ——————————————————————————————————	
TEL TEL	
2. LANGUAGE PARTICULARS Spoken Languages Spoken, Read and Written Fluent enough to tea	ch

To be filled and returned in original. Attach extra sheets where necessary, or for additional information.

3. FAMILY DETAILS							
NAME OF SPOUSE Mr. /Mrs	s				Ας	је	
Educational Qualificat	tions						
Occupation		Orgar	nisation _		Designation		
FATHER'S NAME							
MOTHER'NAME			Age		Occupation		
CHILD'S NAME	Age ———	Sex		ucation	·	lege/Occupation	
	· 						
					**		
EDUCATIONAL HISTORY (In a	chronological	l order)			Enclose self-attested co	py of certificates	
hool/College & University	Locat	tion	Year	Degree	Subjects	Marks%	
							
		_					
							
ACHIEVEMENTS AND DISTIN	NCTIONS DU	JRING EI	DUCATIO	N			
Achievement/Distinction				Description		Year	
•				•			

6. PRESENT/LAST EMPLOYER		
NAME & ADDRESS OF INSTITUTION	BOARD AFFILIATED TO	
	NUMBER OF BRANCHES	
	CLASSES FROM TO	
	NUMBER OF TEACHERS	
TEL	NUMBER OF STUDENTS	
7. EMPLOYMENT DETAILS		
DATE OF JOINING	PRESENT/LAST REMUNERATION	
Grade on joining (PGT, TGT etc.)	Basic Monthly Salary Rs	
Designation on joining	Dearness Allowance Rs	
DATE OF CURRENT APPOINTMENT	House Rent Allowance Rs	
Current Grade	Other perks(please specify)	
Current Designation		
CLASSES TAUGHT		
SUBJECTS TAUGHT	Total Remuneration Rs	
ADDITIONAL PORTFOLIO (If applicable)	-	
JOB RESPONSIBILITIES (Brief description)	ORGANISATIONAL (REPORTING) CHART	
	ONGANISATIONAL (NEI ONTING) CHART	

8. REMUNERATION EXPECTED____

9. PAST EXPERIENCE (In reverse chronological order)					
Year	Name & Location of Institution	Post held	Classes taught	Subjects taught	Reasons for Change
From					
То					
From	_				
То					
From					
То		_			
From					
То	_				
From					
То					
From					
То	_				
From	_				
То					
40 65242255	/ WODKSHOPS /=>	INC COLUBATA :	TTENDED		
	/ WORKSHOPS /TRAIN				
Desci	ription		Organisation		Year

11. ANY PAPERS/ Paper/ Article/ Bo		WRITTEN OR PRESENTED BY YOU Subject		Year		
12. A BRIEF NOTE ON ICT KNOWLEDGE & SKILLS						
13. MEMBERSHIP Name of Organis		CIAL, RELIGIOUS OR POLITICAL ORG	GANISATIONS Your Status	Joined in		
14. ANY HOBBIES, SPECIAL SKILLS OR INTERESTS						
15. DETAILS OF ANY DISABILITY/ SERIOUS ILLNESS Description Consequences Year Period						
16. ANY OTHER RELEVANT INFORMATION/INSIGHT						
·						
17. REFERENCES (Two persons not related, at least one from your line of work who may be contacted) NAME						
OCCUPATION						
ORGANISATION						
ADDRESS						
PHONE						
E-mail Id						

at the time of signing this document.

DECLARATION I certify that the above information is correct and complete to the best of my knowledge, and that nothing has been concealed. If at any time I am found to have concealed or misrepresented any information, my appointment is liable to termination without notice or compensation. I declare that I am of sound mind