ST. FROEBEL SR. SEC. SCHOOL

www.stfroebelschool.com



Application Form Job

Address: A-3 Block, Paschim Vihar, New Delhi-110063. Tel No: +91-11-25251261, +91-11-25287844 Email: info@stfroebelschool.com

Important: Please answer all questions and print the Information clearly in BOLD, using black or blue BALL POINT pen. APPLICATION FOR THE POST OF Date Note: 1. Only certified copies of Degrees/ Certificates/ Testimonials should be sent with this Application Form. Originals must be produced at the time of interview only. 2. Applicants called for the interview shall bear their own travelling expenses unless otherwise agreed in advance. 3. Application should be delivered personally at the School office or sent by Registered Post. PERSONAL DATA OF CANDIDATE Surname First Name Middle Name Date of Birth DD/MM/YYYY Years Months Days Sex: Female Male Nationality Martial Status: Married Unmarried Widow(et) Separated

| Surname | First Name | Middle Name | | | | | |
|---|----------------------|--|--|--|--|--|--|
| Date of Birth DD/MM/YYYY Year | rs Months | Days | | | | | |
| Sex: Female Male National | lity Marital Status: | Married Unmarried Widow(er) Separated | | | | | |
| Address | City | Pin Code Country | | | | | |
| Home Tele# Mob# Fax# Email | | | | | | | |
| Father's/ Husband's Name Occupation | | | | | | | |
| Number of Children: | Age Sex | Grade/Class and School in which studying | | | | | |
| 1 [| | | | | | | |
| 2 [| | | | | | | |
| 3 | | | | | | | |
| | | | | | | | |
| Major illness(es) past or present Physical handicap/ disability if any | | | | | | | |
| Personal Habits: Do you Smoke? Yes No Do you Drink? Yes No | | | | | | | |
| Have you ever been convicted of any criminal offence? If so, give details | | | | | | | |
| | | | | | | | |
| Present Pay/ last salary drawn Basic Pay | Scale | Allowances Total | | | | | |

Reason for leaving

ACADEMIC QUALIFICATIONS

EXPERIENCE

Name of Organisation

| Examination | Board | Subjects | Year | Level | Grade/ Percenta | ge School |
|--|--------------------------|-----------------|------------------------|---------------------|-----------------|--|
| | | 500 Page 10 | 10.00 | | | |
| | | | | | | |
| NIVERSITY O | | T | T | | | The second secon |
| Degree Passed | | Subjects | Subjects Year Division | | % if applicable | University/ College |
| | | | | | | |
| | | | | | | |
| DUCATIONAL | DECDEE/ DIDI | OMA/ CEDTIFIC | ATE | | | |
| DUCATIONAL DEGREE/ DIPL Degree Passed | | Subjects | Year | Division | % if applicable | university/ College |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| EACHING EX | PERIENCE | | | | | |
| EACHING EXI | PERIENCE Subjects taught | Grades/ Classes | Curriculum | From d/m/y to d/m/y | Total F | Reason for Leaving |
| ANN IN IN | | Grades/ Classes | Curriculum | From d/m/y to d/m/y | Total F | Reason for Leaving |
| ANN IN IN | | Grades/ Classes | Curriculum | From d/m/y to d/m/y | Total F | Reason for Leaving |
| ANN IN IN | | Grades/ Classes | Curriculum | From d/m/y to d/m/y | Total F | Reason for Leaving |
| ANN IN IN | | Grades/ Classes | Curriculum | From d/m/y to d/m/y | Total F | Reason for Leaving |
| ANN IN IN | | Grades/ Classes | Curriculum | From d/m/y to d/m/y | Total F | Reason for Leaving |
| School | Subjects taught | | | From d/m/y to d/m/y | 733.003 | |
| School | Subjects taught | | | | 733.003 | |

From d/m/y to d/m/y

Total

Nature of work

| List games you play | | | | | | | |
|---|----------------------------|-----------------------|--|--|--|--|--|
| Special Distinctions achieved | | | | | | | |
| Name literary or cultural activities in which interested. Mention any distinctions achieved. | | | | | | | |
| | | | | | | | |
| Mention whether "Captain"/"Secretary"/"President" of a Team/ Club/ Society. Give names of School/ Colleges where these positions held. | | | | | | | |
| | | | | | | | |
| Any other special particulars/ achievements | | | | | | | |
| | | | | | | | |
| REFERENCES Note: References must be able to comment on your professional performances and/or academic achievements | | | | | | | |
| Name Designa | ation | Telephone | | | | | |
| Address | City/ State | Pin Code | | | | | |
| Name Designation | ation | Telephone | | | | | |
| Address | City/ State | Pin Code | | | | | |
| | | | | | | | |
| How much notice required for joining | | | | | | | |
| Minimum salary acceptable | | | | | | | |
| Have you ever applied for any post in St. Froebel Sd | hool earlier? If so, when? | | | | | | |
| , | | | | | | | |
| | | | | | | | |
| I hereby certify that the particulars furnished above are correct to the best of my knowledge and belief. I have not concealed any information likely to impair my fitness for employment. If it is revealed later that I have given false details or concealed material information, my services | | | | | | | |
| are liable to summary termination without any notice or compensation. | | | | | | | |
| If selected, I shall produce: | | | | | | | |
| a) Medical Certificate from a recognised Hospital/ Clinic/ Registered Medical Practitioner (indicating, in the case of ladies, if they are pregnant)b) Experience certificate from my last employer duly counter signed by the Zonal Educational Officer or the competent authority. | | | | | | | |
| b) Experience confined in the last employer duly counter signed by the zonal Educational Officer of the competent authority. | | | | | | | |
| Date | | | | | | | |
| Date Place | | FOR OFFICE USE ONLY | | | | | |
| Signature of Applicant | | Call for interview on | | | | | |