



Application Form

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 Please affix latest Passport Note: size photograph in colour 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 Registed Post. PERSONAL DATA OF CANDIDATE Middle Name Surname First Name Date of Birth DD/MM/YYYY Years Months Days Sex : Female Male Nationality Marital Status : Married Unmarried Widow (er) Separated Pin Code Permanent Address City Country Mob # **Email Address** Home Tele# Fax# Father's / Husband's Name Occupation Address Number of Children: Grade/Class and School in which studying Age Sex 2 3 Major illness (es) past or present Physical handicap/disability if any Personal Habits: Do you Smoke? Do you Drink? No No Have you ever been convicted of any criminal offence? If so, give details Present Pay/last salary drawn Basic Pay Scale Allowances Total

ACADEMIC QUALIFICATIONS

Examination	Board	Subject	Year	Level	Grade/Pe	rcentage	School
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	OR COLLEGE	1	Year	Division	0/ if any	- Usabla	University / College
Degree Passed		Subject	Teal	DIVISION	% if applicable		University / College
		IPLOMA/CERTIF	1				
Degre	ee Passed	Subject	Year	Division	% if app	olicable	University / College
School	XPERIENCE Subject taught	Grades/Classes	Curriculam	From d/m/y to d/m/y	y Total	R	Reason for Leaving
SCHOOL	Subject taught	Glauco, Glauco	Gumoulam	FIUIII u/iii/y to umiy	Ισιαι	1.	Bason for Leaving
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ROFESSIC	NAL TRAIN	ING AND EXP	ERIENCE (F	or non-te	EACHING	G POST	TS)
RAINING							
	ne Institution	Course attended	From d/m/y to d/m/y	Total	Shor	rthand/Typir	ng speed/Grade
	ne Institution	Course attended	From d/m/y to d/m/y	Total	Sho	rthand/Typir	ng speed/Grade
RAINING Name of th	ne Institution	Course attended	From d/m/y to d/m/y	Total	Sho	rthand/Typiı	ng speed/Grade
	ne Institution	Course attended	From d/m/y to d/m/y	Total	Sho	rthand/Typiı	ng speed/Grade

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: Reference must be able to comment on your professional performances and/or academic achievements also								
Name Designation								
Address	City/State Pin Code							
Name Designation	Telephone							
Address	City/State Pin Code							
How much notice required for joining								
Minimum salary acceptable								
Have you ever applied for any post in any G. D. Goenka School 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 eompetent authority.								
Date Place	FOR OFFICE USE ONLY							
Signature of Applicant	Call for interview on							