

DELHI PUBLIC SCHOOL VISAKHAPATNAM STEEL PLANT
 SECTOR-VIII, UKKUNAGRAM, VISAKHAPATNAM (AP) 530 032

APPLICATION FORM

POST APPLIED FOR :

Department :

Have you applied for a post at
 Delhi Public School Visakhapatnam earlier,
 if so, for what post and when :

Please affix
 recent passport
 size photograph

(Application should be complete in all respects. Incomplete applications will not be considered)

To filled in by the candidate in his / her own handwriting.

A) PERSONAL DATA E-mail :.....

1. **Name in full** (in block letters) Mr. / Mrs. / Ms.

2. **Mailing address** (in block letters)

.....

.....Pin Code.....

Mobile Nos. Email id.....

3. **Permanent Address** (in block letters)

.....

.....Pin Code

Mobile Nos. Email id.....

4. **Date of birth** 5. **Religion**

5. **Marital status**(Married / Single) 6. **Category**(Gen/SC/ST/OBC)

7. **AADHAAR No**

8. **Children and other dependents**

Name	Relationship	Age
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9. **Father's / Guardian's Name**

B) PHYSICAL DATA

- 10. a) **Height**cms b) **Weight** kg
- c) **Eye sight** (wearing spectacles) Yes / No. If yes, power
- d) **Blood group**

11. **Are you a handicap by any means.**

- a) Sight () b) Hearing () c) Feet () d) Hand ()

If yes, kindly provide details with regard to the extent it has hampered your normal working.

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12. Have you had any operation / illness during the past 3 years? If so, details.

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C) ACADEMIC QUALIFICATION

13.

Name of the College / School & Location	University	Period attended		* Degree / Diploma	Main subject taken Specialization	Class / Rank / Percentage
		From	To			
X						
XII						

*State whether part time (P) Full Time (F) Correspondence (C.)

14. Kindly furnish details of **scholarship / special merit awards**

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15. Kindly provide details on your **extra-curricular activities / hobbies / field of interest** during your college days including awards received / knowledge of music.

a)
 b)
 c)

16. Briefly describe in about one hundred words why you chose or desire to choose teaching as a Profession, detailing your strengths and weaknesses as a teacher: (You may attach a separate sheet of paper).

D) PROFESSIONAL INFORMATION

17. **DETAILS OF THE IN-SERVICE TRAINING PROGRAMMES ATTENDED** (Enclose copies of Certificates)

Organization	No of in-service programmes attended	Total No of hrs of training	Remark

18. **PREVIOUS TEACHING /WORKING EXPERIENCE** (Enclose copies of Certificates)

Name of the Institute & Place	Duration		Designation	Reasons for leaving
	From	To		

Total experience Teaching Non-Teaching Administrative.....

Pre-Primary/Primary.....Middle School.....Secondary.....Sr Sec.....

19. **RESEARCH EXPERIENCE**

- a)
- b)

20. **PUBLICATIONS**

Kindly furnish list of papers / articles published by you. (Use additional sheets, if necessary)

- a)
- b)

21. **SALARY STRUCTURE**

Your present salary structure or last pay drawn (last pay certificate may be produced at the time of interview)

Pay Band **Grade Pay** **PB**

- a) Basic Rs.
 - b) Dearness Allowance Rs.
 - c) Additional D.A. Rs.
 - d) H.R.A. Rs.
 - e) Transport Allowance Rs.
 - f) Any other Rs.
- Total salary per month Rs.**

E) **GENERAL INFORMATION**

a) **Languages which you are proficient with:**

Speak	Read	Write
.....
.....
.....

b) Are you a member of any Professional Body / Institute / Society? Yes / No

22. Have you traveled abroad for training / studies? Yes / No.

.....

23. Do you: a) smoke – (Yes / No) b) consume alcohol -(Yes / No.) c) use tobacco products – (Yes / No)

24. If offered the post, time required to join

F) Give details of any / all Social Networking Sites of which you are a member

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25. Please give the names of two acquainted with your attainments. If related give details of relationship.

a) Name

Address

b) Name

Address

c) Additional information, if any (attach separate sheet)

26. Details of the DD: No.....Drawn on.....Date.....

27. I hereby declare that the particulars furnished by me in this application form are true to the best of my knowledge and belief. In case any information is found to be incorrect at any stage, my candidature shall liable to be rejected.

Signature.....

Name:.....

Date: