

Suncity School
BPTP Society, Sector-37D,
Basai, Gurugram, Haryana

Ph: +91 8448730803. Website: www.suncityschool-37d.com

TEACHER'S APPLICATION FORM

Applying for the post of: _____
Total years of experience: _____

Personal Information

Name: _____ Middle Name: _____

Date of Birth:

dd	mm	yy

 Age:

yy	mm	dd

Sex: Male/ Female Nationality: _____ Passport No: _____

Permanent
Address:

Telephone No: Res. _____ Off.: _____ Fax: _____
Mobile No: _____ E-mail Id: _____

Father's / Husband's / Wife's Name: _____

Occupation: _____

Address:

No. of Children: _____

Name: a) _____
b) _____
c) _____

Age: a) _____
b) _____
c) _____

School / College: a) _____
b) _____
c) _____

Grades: a) _____
b) _____
c) _____

Educational Qualification:

Senior Secondary / A LEVEL / IB DIPLOMA

Examination	Year	Subject	Grade / Percentage / Points	School/ College

College or University

Degree	Years	Subjects	Grade/ Percentage	College/University

Professional Qualification

Name of Institution	Town	From - To

Professional Experience:

Total Teaching Experience in Yrs: _____

Institution/Organization	Subject Taught	Grades/Classes	Curriculum	From d/m/y to d/m/y

Other responsibilities
besides Teaching:

Reason for Leaving/
Reason for wanting to
Leave:

Non Teaching

Institution/Organization	Nature of Work	From d/m/y to d/m/y	Reason for Leaving

Games & Sports
Played:

Level played up to. Name the relevant game below the level played at:

Intra School	Inter School	District Level	State Level	National Level	International Level

Any Other: _____

Literary & Cultural Activity Participated and Excelled in level of Achievement:

- a) _____
- b) _____
- c) _____
- d) _____

Any Other: _____

Any Post Held in School / College: _____

A brief write up about your strength & weaknesses; what innovative methods you have incorporated into your teaching & how it's helped you. How you propose to contribute to take the school to the Pinnacle of Education.

Present Pay Scale:

Basic: _____ +DA: _____ + Allowances: _____ = Total: _____

Minimum Salary Expected: _____

Notice Period Required: _____

Medical History:

Handicapped: YES ____ NO ____ (Please tick the following free space)

Ailment (If Any): _____

UNDERTAKING

I hereby certify that the particulars furnished above are correct to the best of my knowledge. All information provided is authentic and if proven to be false or concealed; my services may be liable for termination without any notice or compensation.

I shall furnish the following if selected

- 1) Attested copies of Degrees / Certificates / Testimonials (Original to be brought for verification during interview)
- 2) Medical Certificate from a Registered Medical Practitioner
- 3) Experience certificate from the last employer duly signed from the Zonal/ District Education Officer or a Gazetted Authority

Travel Expenses to be borne by Applicants unless intimated & specified otherwise by the school in written.

Date: _____ Place: _____ Signature: _____

For Office Use Only

Recommended / Not Recommended

Interview On: _____

Intimation to Applicant Date On: _____ By: _____

Name & Signature of Authority: _____

References

1) Name: _____

Designation: _____

Telephone No.: _____

Mobile No: _____

Email Id: _____

Fax No: _____

Address:

2) Name: _____

Designation: _____

Telephone No: _____

Mobile No: _____

Email Id: _____

Fax No: _____

Address: