



# S.B.R.S GURUKUL

PROMOTED BY: ABDUL KADIR SHEHANSHAH HAZRAT  
EDUCATIONAL & RESEARCH SOCIETY (Regd.)  
NH-95, Mehna, Distt- Moga  
C.B.S.E Pattern, Day Boarding School.

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## APPLICATION FORM

1. Application for the post of \_\_\_\_\_
2. Name of the applicant \_\_\_\_\_
3. Son / Daughter /Wife of \_\_\_\_\_
4. Date of Birth:
5. Age as on the date of applying
6. Nationality: \_\_\_\_\_ State: \_\_\_\_\_
7. Correspondence Address: \_\_\_\_\_  
\_\_\_\_\_

Land Line. \_\_\_\_\_ Cell No. \_\_\_\_\_ /Contact Person \_\_\_\_\_

8. Qualification \_\_\_\_\_

9. Details of qualification:-

Examination	Year of passes	Board/ University	Percentage	Division	Subject(s)
Matric					
Inter 10+2					
Graduation					
Post Graduation					
Training Degree/ diploma					
Additional qualification (if any)					

10. Previous appointment held: \_\_\_\_\_

11. Designation of the superior incharge: \_\_\_\_\_

12. Name and address of the institution: \_\_\_\_\_  
\_\_\_\_\_

13. Last salary drawn: \_\_\_\_\_

14. Teaching Experience: \_\_\_\_\_

15. Experience

S.No.	Name of the institute	Post held	Whether residential or not	Nature Permanent/Adhoc	W.e.f	To	Duration

16. CCA

Nature of Activity	Participation		
	National level	State level	District level

17. Games & Sports

Activity	Participation		
	National level	State level	District level

18. NCC

C certificate	B certificate	A certificate

19. S & G

Pratham sopan	Dwitya sopan	Tritya sopan

20. Language Known \_\_\_\_\_

21. Significant Achievement, if any:

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22. Publications, if any:

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23. Education & Learning, Correlate:

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24. Give names of two references who have known your working in the past. (One of them must be your previous employer):

1. Name: \_\_\_\_\_

2. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

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25. Agreement:

*I agree to abide by the rules of the society, if appointed. I undertake to serve the school till the end of the term i.e. unto finalization of the results of the classes taught by me.*

*I solemnly affirm that all the above particulars/statements are true the best of my knowledge and belief and nothing is concealed therein.*

Date: \_\_\_\_\_ (Signature of the candidate)

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(For office use only)

Recommendations:

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(Authorized signatory)