



FORD SCHOOL & COLLEGE

Kazipur, Naini, Prayagraj - 211008

[Established in 2012]

APPLICATION FORM

Application No.

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Affix Photograph

1. Post applied for _____ Adv. Ref. & date _____

2. Name of the applicant _____
(In block letters) (First Name) (Middle Name) (Last Name)

3. Father's Name _____

4. Date of Birth

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 5. Nationality _____

6. Physical Disabilities (if any) _____

7. Permanent Address _____

8. Correspondence Address _____

9. Contact No. (STD Code) _____ Mob. _____

10. Marital Status _____ No. of Children _____ 11. Religion _____

12. Previous employment (a) UNA No. _____ (b) ESIC No. _____

13. Name of the educational institution attended.

Sl. No.	Name of the Institution attended	Location	Year of Joining	Year of Leaving
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

14. Particulars of academic and technical qualifications:

Sl. No.	Examination or degree	Examination body	Year of passing	Division / Grade	% of Marks	Main Subject	
1.	High School						
2.	Intermediate						
3.	Graduation						
4.	Post Graduation						
5.	Doctoral Degree						
6.	P.G. Diploma						
7.	Technical / B.Ed.						
8.	T.E.T / C.T.E.T						
9.	Other relevant qualifications						

15. Particulars of employment:

Sl. No.	Name of the Employer	Post held	Date of Joining	Date of Leaving	Salary	Reason for leaving
1.						
2.						
3.						
4.						
5.						

16. Any other experience:
 (Attach separate sheet, if required)

17. Details of achievements:
 (Attach separate sheet, if required)

18. Languages known:

Sl. No.	Languages	Speak	Read	Write
1.	Hindi			
2.	English			
3.	Any Other			

19. Highest examination passed in Hindi/English :

20. Did you ever apply to this Institution previously?

21. Notice period required to be relieved from the present employer:

22. Name of two referees: (They should not relate to you, and should respond to enquiries about character, intelligence, capacity etc. Include the head of the educational institution and the present employer UNLESS copies of testimonials from them are attached)

A. Name:	B. Name:
Occupation:	Occupation:
Address:	Address:
.....
.....
Ph. No.	Ph. No.

23. If employed, attach "No Objection Certificate" of the employer with seal.

SELF DECLARATION

I _____ hereby certify that entries in this form and additional particulars furnished are truly and correctly stated. I understand that whenever any of the facts stated above are found to be incorrect, my appointment is liable to be quashed.

E-mail

Mob. _____

Date:

Signature of the applicant
