



Delhi Public School

JAGDALPUR (CG)

Paste Passport
Size Photo

INSTRUCTIONS:

+ PLEASE FILL THE FORM IN CAPITAL LETTER ONLY.

CANDIDATE IDENTIFICATION FORM

POST APPLIED FOR	
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FIRST NAME	MIDDLE NAME	SURNAME

PRESENT ADDRESS	PERMANENT ADDRESS	PHONE NUMBERS
		OFFICE :
		RESIDENCE :
		CELL NO.:
EMAIL ADDRESS		

MOTHER'S NAME	OCCUPATION

FATHER'S NAME	OCCUPATION

SPOUSE'S NAME	OCCUPATION

DATE OF BIRTH	NATIONALITY	SEX	CATEGORY (✓)					MARITAL STATUS (✓)			
			SC	ST	OBC	GEN	OTHER	UN-MARRIED	MARRIED	OTHER	

CHILDREN (YES / NO). IF YES GIVE DETAILS.			
NAME OF CHILD	SEX	DOB	QUALIFICATION

EDUCATIONAL – TECHNICAL - PROFESSIONAL QUALIFICATIONS (START FROM 12 TH)						
SN _o	QUALIFICATION	STUDY PERIOD		INSTITUTION - BOARD/ - UNIVERSITY	SUBJECT/ SPECIALIZATION	%TAGE
		FROM	TO			
1.	10 + 2					
2.						
3.						
4.						
5.						
6.						
MEDIUM OF INSTRUCTION IN		SCHOOL			COLLEGE	

TRAINING RECEIVED			
DATES	TOPIC / AREA OF TRAINING	DURATION	NAME OF THE INSTITUTION

HAVE YOU EVER BEEN ARRESTED/ CONVICTED BY ANY COURT OF LAW IN INDIA OR ABROAD	
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IF YES, PLEASE PROVIDE DETAILS	
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WERE ANY DISCIPLINARY PROCEEDINGS INITIATED/ CONTEMPLATED AGAINST YOU DURING OR AT THE TIME OF QUITTING THE SERVICE	
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IF YES, PLEASE PROVIDE DETAILS	
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WORK EXPERIENCE DETAILS (Starting from latest)					
PERIOD OF EMPLOYMENT		NAME OF THE ORGANIZATION (NAME & PLACE)	NATURE OF WORK IN BRIEF (Subject/ Classes Taught etc)	SALARY PAY SCALE EMOLUMENTS	REASON FOR LEAVING
FROM	TO				
TOTAL EXPERIENCE (Yrs & Months)		TEACHING -		ADMIN -	

HAVE YOU VISITED ANY FOREIGN COUNTRY (Give Details)	
SCHOLARSHIPS / HONOURS/ AWARDS RECEIVED	
PROFESSIONAL MEMBERSHIP	
EXTRA CURRICULAR ACTIVITIES / HOBBIES / SPECIAL INTERESTS	

KNOWLEDGE OF LANGUAGES (WRITE GOOD, FAIR, POOR, AND NOT AT ALL)					
LANGUAGES					
READ					
WRITE					
SPEAK					

KNOWLEDGE OF COMPUTER (✓)					
SOFTWARE	EXCELLENT	GOOD	FAIR	POOR	NOT AT ALL
MS-WORD					
MS-POWERPOINT					
MS EXCEL					
GRAPHICS S/W					

REFERENCE OF TWO PERSONS NOT RELATED TO YOU, WHO ARE WELL ACQUAINTED WITH YOUR BACKGROUND/ SERVICE CAREER & CHARACTER			
NAME	ADDRESS	CONTACT NUMBER	OCCUPATION

DECLARATION BY THE CANDIDATE		
<p>I HEREBY DECLARE THAT ALL THE INFORMATION FURNISHED (PAGE 1-4) IN THIS FORM IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND I FULLY UNDERSTAND THAT IF ANY INFORMATION GIVEN IS FOUND FALSE, MY SERVICES ARE LIABLE TO BE TERMINATED AT ANY TIME WITHOUT ANY NOTICE BY THE MANAGEMENT.</p>		
DATE:	PLACE:	(SIGNATURE OF THE CANDIDATE)

FOR OFFICE USE ONLY	
FILE NO.	
<u>REMARKS</u>	
DATE:	(SIGNATURE)

Please Evaluate Yourself

STRENGTH

1	
2	
3	
4	
5	

WEAKNESS

1	
2	
3	
4	
5	

AREA OF IMPROVEMENT

1	
2	
3	
4	
5	

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Write your views in any of the topic given below :

- Teacher's Role in present education system.
- Effectiveness of CCE (Continuous Comprehensive Evaluation).
- Topic of your own choice.

(Strictly in the space given below)

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