



DAYANAND PUBLIC SCHOOL, SHIMLA

The Mall, Shimla-171003 (H.P)

Ph. 0177-2653530, E-mail : dpssml@yahoo.co.in, Website: www.dpsshimla.org

(MANAGED BY DAV COLLEGE MANAGING COMMITTEE, NEW DELHI)

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APPLICATION FORM

(Please ensure that you provide all the required information. Please complete this form in your own handwriting, using CAPITAL LETTERS and ticking the appropriate boxes)

Post Applied for		CBT Roll Number		P.E.C. Attached (as downloaded from DAVCMC website). Yes/No									
Applicant's Name	First Name			Middle Name				Surname / Last Name					
	Father's Name			Spouse's Name									
Gender	M		F		Date of Birth:	D	D	M	M	Y	Y	Y	Y
Age				Marital Status:									
Religion				Category				SC / ST / OBC / General Caste _____					
Nationality				Mother Tongue									
Aadhar no.				PAN No.									
Address for Correspondence:													
Permanent Home Address :													
City :				Pin Code :				State :					
Tel. No.				Mobile :				E-mail id :					

3. EDUCATIONAL QUALIFICATIONS

Qualification	Subjects and specialization	Year of passing	Fulltime/ Part time/ Distant Education	Name of the School /College	Board / University/ Institute	Marks (out of)	%
Class X							
Class XII							
BACHELOR'S DEGREE							
B.A.							
B.Com							
B. Sc							
Others							
MASTER'S DEGREE							
M.A							
M.Com							
M. Sc							
M.C.A							
Others							
PROFESSIONAL DEGREE							
D.El.Ed							
B.Ed							
B.P.Ed							
M.Ed							
M.P.Ed							
CTET / HPTET							
Paper I	<input type="checkbox"/>						
Paper II	<input type="checkbox"/>						
Any other qualification (if any)							
Computer Proficiency							

5. Details of Extra Curricular Activities (Please mention activity, role, level and outstanding achievements, if any):

DETAILS OF WORK EXPERIENCE

Name of the Organization / School and Board Affiliated to CBSE, ICSE, HP Board.	Period			Designation	Classes taught	Subjects taught	Experience full time / part time Experience certificate (Yes/No)
	From	To	Total Period				
6. Total Teaching experience (in years)							
7. Other Professional Experience, if any (in years)							
8. Details of Last Drawn Salary							

Declaration :

I, _____ hereby declare that all the information furnished by me in this application is true to the best of my knowledge and belief. I will produce copies and / or originals of certificates as required at any time.

Date : _____

Place : _____

Signature : _____

Mandatory:

P.E.C. (as downloaded from DAVCMC website) is to be attached with this application form, otherwise, the application will not be accepted.