

## **EMERALD HEIGHTS SCHOOL**

Photo Compulsory

Appl	ication for the P	ost of					• • • • • • • • • • • • • • • • • • • •		
PERS	SONAL INFORMA	ATION:							
Full N	ame (in BLOCK letter	rs)					• • • • • • • • • • • • • • • • • • • •		
Date o	of Birth (Fig.)	(	Words) .						
Addre	ss for Communication								
with p	hone nos				Email ID-				
Place o	of Birth	Mo	ther Tor	ngue		Natio	onality		
Caste		Category			Ge	nder	Marital Status.		
	ls of Children (if mar	ried)							
Sr. No.		Name			Gender	Date of	of Birth	Age	Studying in Class
1.									
2.									
LANC	GUAGES KNOWN								
		(1)			(2)			(3)	
Speak									
Read									
Write									
Name Fathe	& Occupation of								
	e & Occupation of								
Spous	se								
EDU	CATIONAL QUALI	FICATION	: (X onv	vards)					
Sr. No.	Qualification	Year of Passing		Name of hool/College		e of Board niversity	Sub	oject	% of marks
<b>-</b>		1			1		1		1

## PROFESSIONAL QUALIFICATION:

Sr. No.	Qualification	Year of Passing	Name of School/College			Name of Board /University	Subject	% of Marks
DETA	AILS OF PREVIO	OUS WORK	EXPERII	ENCE:				
Sr. No.	Name of Institution			From	То	Designation	Job Responsibilit	y
DETA	AILS OF YOUR I	PRESENTE	EMPLOYN	MENT:				
	of Organization					_	n	
	_							
Presen	Salary:			Expected	Salary	•		
۱re yo	u under bond peri	od (Yes/No)		J	oining	Period (if selected) .		
	CTWO	who can you	ch for you					
Details	of <b>TWO</b> persons	wilo call vous	•					
Details Partic		who can vou	(1)	)			(2)	
		who can vou		)			(2)	
Partic	ular	who can vou		)			(2)	
Partic Name Design	ular	who can vou		)			(2)	

I, certify that the above information given is true to the best of my knowledge and belief. If any information is found to be incorrect it will disqualify me for employment in any of the schools affiliated to Emerald Heights School, Akola.

Signature of Applicant:

Tel. No.