JASPAL KAUR PUBLIC SCHOOL 'B' PASCHIMI ,SHALIMAR BAGH DELHI – 110088

DUONE.	27470022 27470055
PHONE:	27470022,27470055

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APPLICATION OF						PHOTOG	RAPH
I) <u>PERSONA</u>	L DETA	<u>ILS</u>					
1. NAME :							
2. DATE OF BIR	CTH:						
3. PRESENT AD	DRESS:						
TEL NO	D:		MOBILE:		_EMAIL ID	:	
4. MARITAL ST	ATUS:						
5. CHILDREN &	THEIR	AGE:					
6. NAME OF FA	THER/S	POUSE:					
7. OCCUPATION							
II) <u>EDUCATIO</u>							
Exam Passed	Year of Passing	Name of Institution (School/ College)	Regular/ Distance/ Correspondance	Name of Board or University	Class/Div & % of Marks	Subjects	Medium of Instruction
Class XII							
B.Sc./B.A/ B.Com/ B.P.Ed (Hons/Pass)							
M.A./M.Com M.Sc/M.P.Ed.							
B.Ed/M.Ed.							-
Any Other							
III. LANGUAG	GES KNO	DWN: 1		2		3	·

IV) <u>F</u>	EXPERIENCE:						
S.No	Institution, (Name and place) (from latest position first)	Dates from To	Classes Taught	Subjects Taught	Medium of Teaching	Salary Basic plus allowances; Total:	Whether working on contract/ adhoc/ permanent
1.							
2.							
3.							

V. OTHER INTERESTS AND ACTIVITIES

GAMES & SPORTS: GAMES PLAYED : (1)_____(2)____

a)	STANDARD ACHIEVED - REPR	RESENTED SCHOOL/
COLI	LEGE/UNIVERSITY/ ZONAL	/STATE/NATIONAL

VI. CREATIVE ACTIVITIES (TICK THE RELEVANT CHOICES) : ART/CRAFT/MUSIC/

DRAMATICS/ DEBATES /DANCING/OTHERS (Please specify)_____

VII. WHICH ARE THE CO-SCHOLASTIC AREAS IN WHICH YOU CAN CONTRIBUTE IN THE SCHOOL

PUBLICATIONS, IF ANY, TO YOUR CREDIT:

(a)	(b)
IX. <u>REFERENCES</u> : Give names, profession and addre (a) Name:	esses of two references: (b) Name:
Profession:	Profession:
Address:	Address:
Phone No.:	Phone No.:
X. Mention the date on which selected):	h you can join (if
	nents made by me above are correct to the best of my

SIGNATURE OF THE CANDIDATE

DATE

N.B.Please email the filled form to principal@jkps.org