

ITBP Public School

Sector-16B, Dwarka, New Delhi-110078 Tel: 011-28087111

Post Applied for: -----

		Personal Detail	
Name	:		
Date of Birth	:	_//	
Marital Status	:		
Father's/Husband Name	:		Paste latest Photograph
Mobile No	:		
Email-Id	:		
Address for Correspondance	:		
Permanant Address	:		

b) Educational Qualification: (from Higher to Lower)

S.No.	Degree	University/Board	Subjects	Year	%age
		•		of	
				passing	
1					
2					
2					
3					
4					
•					
5					

S.No.	Degree Degree	Unive	ersity/Board		Subj	ects		Year of passing	%age
1								Pmss0	
2									
3									
Tea	aching Expe	rience ((From L	atest to	First)	Classes		4 4 ala4	
S.No	Name of the in	stitution	From To		of Service Total Exp.	Classes taught	Subjects taught		
1									
2									
3									
4									
5									
Γotal	Experience	e:							
	engths and								
My Strengths				My Weaknesses					
- •	- - - -				·		,		

,		ties:		
	·	nch separate sheet, if n	*	
h) Hov	w else can you co	ntribute to school, oth	ner than te	aching your subject?
i) 7	Two references:			
S.No.	Name	Designation/po	ost	Contact No.
j) Dec		eclare that the information state	ed above is true	e to the best of my knowledge
Date: Place:			Signatu	re of the applicant
Engla	STAMOS A			

- Self-attested photocopies of the all educational and professional qualification's documents.
 Photocopy of experience certificates.