

**BAL SHIKSHAN SAMITI TRUST
HARINAGAR SOCIETY, GOTRI ROAD
VADODARA-390023
PH: 0265- 2399541**

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here

Form no: _____

Ref. Advertisement in: _____ Dated: _____

Application for the post of: _____

Teaching subject/s: _____ B.Ed. / T.T.T _____

(A) PERSONAL DETAILS

Full Name: _____

Date and place of Birth: _____ Gender _____

Mother Tongue: _____

Languages spoken at home: _____

Father's /Spouse's (if married) name: _____

Father's / Spouse's profession: _____

Place of Work: _____

Children: a) Number _____ b) Age _____ c) Gender _____

Address for communication: _____

_____ Phone/Mobile _____

Permanent Address: _____

_____ Phone/Mobile _____

E-mail: _____

Kindly specify if you are suffering from any ailment or are under medication for an illness _____

Blood Group: _____ Emergency Contact No. with relation: _____

(B) QUALIFICATION

Educational Qualification: _____

1) Academic Details (to be mentioned from class X onwards)

Sr. No.	Examination Passed	Name of the School/College	Board/ University	Subject/s	%	Year of passing

2) Professional Training: _____

(C) WORK EXPERIENCE

Teaching Experience (in years): _____

Details of employment (past & current)

Sr. No.	Name of Organization	Designation	Subject/s taught	Nature of duties	Worked from date, to date	Reason for Leaving

(Attach a separate sheet if required)

(E) GENERAL INFORMATION

Participation in professional programme/s: _____

Achievement in co-curricular activities: _____

Hobbies: _____

If you are a member of any club (literary, music) or any other organization, give details:

Which subject/s and/or activity/s besides the area of your specialization, can you handle?(Mention them in order of preference)

<u>Classes I -- V</u>	<u>Classes VI -- VIII</u>

<u>Classes IX -- X</u>	<u>Classes XI -- XII</u>

Proficiency in languages (Excellent, Good or Fair):

Language	Speaking	Reading	Writing

Proficiency in co-scholastics:

Activity	Description	Level	Performance

Salary:

	Grade	Basic pay	Allowances	Total
Last drawn				
Expected				

If selected, time required to join: _____

References (other than relatives), Mandatory to provide (*Write complete mailing address with phone no.*):

_____	_____
_____	_____
_____	_____
_____	_____

Describe yourself in two lines: _____

I hereby certify that the foregoing information is correct and complete to the best of my knowledge and belief, and nothing has been concealed. If at any time, I am found to have concealed any information or given any false details, I will be liable for appropriate action.

Date: _____

Signature: _____