

**D.A.V. CENTENARY PUBLIC SCHOOL**DANGRA ROAD, TOHANA, DISTRICT FATEHABAD
Under Direct Control of: DAV College Managing Committee, New Delhi**Job Application****(Only DAV CBT Qualified Candidate Can Apply)**

Sr. No..... Online Transaction UTR No..... Dated.....

Instructions :

1. Certified copies of testimonials should be attached with the application. Amount: Rs.300/-
2. Testimonials, in original, must be produced at the time of interview.
3. No T.A./D.A. will be paid for interview. Signature.....
4. Cheque/DD should be in favour of 'DAV Centenary Public School, Tohana'
5. Incomplete application is liable to be rejected.
6. DAVCMC, New Delhi reserves the right to transfer him/her to any other institution at any place under its management.

1. CBT Qualified for: Level : _____ Subject : _____ Roll No. _____

2. Post for which applying _____

3. Name of the Candidate _____
(in block letters) Mr./Ms./Mrs.

4. Father's/Husband's Name _____

5. Complete present postal address _____
_____Paste latest passport
size photograph

Phone No.:(Mob.) _____ (Resi.) _____ E-mail _____

6. Date of birth (in figures): _____ Age : yrs. mths.

(in words) : _____

7. Nationality: _____ 7. Category: _____

8. Marital Status: _____, If married, No. of Children: _____

9. Qualification: _____ (Kindly attach copy of certificates)

Examination	Name of School/College/ Pvt./Distance	Board/Uni.	Subjects Offered	Year of passing	Medium of study	%age of marks obtained
a) Matric/Secondary						
b) Hr. Sec./Sr. Sec.						
c) B.A./B.Sc./B.Com						
d) M.A./M.Sc./M.Com						

e) B.Ed./J.B.T./M.Ed						
f) Any other Qualification						

10. Teaching Experience:

(Kindly attach copy of certificates)

Name of School	Period of Service		Design.	Class & Subject(s) taught	Pay Scale & Total emoluments	Experience	
	From	To				Year	Months
a)							
b)							
c)							
d)							
e)							
Total Experience of Teaching							

11. Educational Administrative Experience:

(Kindly attach copy of certificates)

Name of School	Design.	Pay Scale	Nature of Job	Period		Total Admn. Exp. in years & months
				From	To	
a)						
b)						
c)						

12. Publications, if any, to your credit (Please attach separate sheet, if required):

1.

2.

13. Experience of attending In-service Programmes as Participant/Resource Person(last 3 years):

(Kindly attach certificates)

Particulars of the programme such as Seminars, Workshops etc.	In what capacity	Period		Organized by	Remarks, if any
		From	To		

