

Greenfields Public School

G.T.B. Enclave, Dilshad Garden, Delhi-110093 Tel. No.: 011-22584740, 22118756 Website: www.greenfieldspublicschool.com

Email: info@greenfieldspublicschool.com

(APPLICATION FOR NON-TEACHING JOB)

Passport Size Latest Photograph

ADDI	CATION	FOR THE	DOCT OF
AFFL	ICATION	TUK INE	PUSI UF

1	PERSONAL DATA:				
	Name in full : Shri/Smt/Kumari				
	(in block letters)				
	Son/Daughter /Wife of				
	AgeDate of Birth				
	(Documentary proof in original to be submitted by the applicant at the time of appointment.)				
	Nationality Religion State				
	Present Address				
	E-mail				
	Permanent Address				
	Telephone No(Mobile no.)				
2.	2. PREVIOUS/PRESENT OCCUPATION:				
	Designation				
	Name & address of the organisation				
	Joining period required, if selected?				
	Salary last drawn				
3.	FAMILY DETAILS:				
	Marital Status :Single/Married/Widowed				
	If married, are you in family way? If so , medical certificate should be submitted in the event of selection.				
	If married /widowed : No of children with age and sex				
	Are your parents alive? Father/Mother /Both				
	Are they dependent on you?				
	Are you dependent on them?				
	Husband's occupation with office address				
	Phone no : Mobile no:				

4. EDUCATIONAL RECORD:

Name, in Chronological order, of the institution you attended.

Examination Passed	Year	Subject studied	% of Marks obtained	Medium of instruction	Name & Address of school /college
			obtained		

5.	NCC Scouting, Music/Art Dramatics/Games/Sports or other activities mentioning rank /status specialization (and the nature of specialization) and proficiency achieved:
6.	DO YOU HAVE KNOWLEDGE OF COMPUTER, IF YES, GIVE DETAILS:
7.	EXPERIENCE Fill in the particular, in chronological order, starting with your first appointment
	(if the space is not enough attach the separate sheet)

From To (Exact dates to be indicated).	Name of the organization with address.	Work assignment.
		Agriculture proposed and the
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8. HEALTH
(A) Do you need any medical treatment/assistance for your ailments (if any)?
(You would be required to submit fitness certificate, (if selected)
9. REFERENCES:
Give name of two referees (not relatives) who know you well personally and have an intimate knowledge of your work and conduct:
(a) Name(b) Name
Address Address
10. UNDERTAKING:
If Appointed, I agree to abide by the rules and regulations of the Greenfields Public School / Society.
I solemnly state that all the above particulars /statements are true to the best of my knowledge and belief.
DateSignature of applicant.