

# WISDOM PUBLIC SCHOOL

Quarsi, Ramghat Road, Aligarh-202001 (U.P.)



SR. SECONDARY SCHOOL  
(Affiliated to C.B.S.E., Delhi)

S.No.

Rs. 10/- only

Session : 20\_\_\_\_ - 20\_\_\_\_

## TEACHER'S APPLICATION FORM

### Instructions :

1. All Entries must be filled by the candidate in his/her own hand writing only.
2. All Entries must be completed & written clearly in BOLD LETTERS using blue or black ball pen only.
3. Do not attach original certificates and testimonials with this application. Original documents are to be shown at the time of interview only.

### PRIMARY INFORMATION

CANDIDATE'S NAME :

POST APPLIED FOR :

- Pre-Primary Teacher
- Primary Teacher (PRT)
- Trained Graduate Teacher (TGT)
- Post Graduate Teacher (PGT)

#### PASTE

A recent  
passport size  
**SELF ATTESTED**  
coloured  
photograph

HIGHEST QUALIFICATION : ACADEMIC  PROFESSIONAL

SUBJECT (S) OF INTEREST :

CLASSES OF INTEREST :

SOURCE OF INFORMATION REGARDING THIS VACANCY : \_\_\_\_\_

### INTERVIEW PERFORMANCE / TEST MARKS

(For Auth. Use only)

S. No.	Particular	Called on Date	Performance	Remarks	Signature		
1.	First Interview						
2.	Written Test		Marks = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td></tr></table>				
3.	Class Demonstration						
4.	Second Interview						

Selected / Not Selected :  Name of Post (if Selected) :

Recommended Subject (s) to teach :

Recommended Classes :

Negotiated Salary (Per Month) : Rs.

Signature



## PERSONAL INFORMATION

1. Name as in Matriculation Certificate :

2. Changed Name (After marriage, if any) :

3. Father's / Husband's Name :

4. Current Address :

Ph./Mobile :

5. Permanent Address :

Ph./Mobile :

6. Date of Birth :  D  M  Y  Y

(As per matriculation Certificate)

7. Date of Birth (in words) : \_\_\_\_\_  
 \_\_\_\_\_

8. Your age at present :  Years  Month(s)

9. Place of Birth : \_\_\_\_\_ District : \_\_\_\_\_ State : \_\_\_\_\_

10. Sex (Male / Female) :  Religion :  Caste :

11. Marital Status :  Single  Married  Widow/Widower  
 Divorced  Re-Married

12. Proficiency in Languages :  
 (Write Mother Tongue at S.no.1)

S. No.	Languages	Can Read ? (Yes/No)	Can Write ? (Yes/No)	Speak Fluently ? (Yes/No)
1.				
2.	ENGLISH			
3.				
4.				

13. Detail about the Dependent Children :

S. No.	Name	Sex	D.O.B.	Age	Qualification / Studying	Passed from / Studying in School
1.						
2.						
3.						
4.						

**13. Family Background (Give Complete Details)**

Relation	Name	Occupation	Designation	Department	Nature of Business, if any
Spouse					
Father / Father in law					
Mother / Mother in law					

14. Spouse Official Address :

Ph./Mobile :

**TEACHING EXPERIENCE OF RECOGNISED SCHOOL ONLY**

1. Total Years of Teaching Experience :  Experience in words : \_\_\_\_\_

S. No.	Name & Address of School	Affiliation of the school	Position Held	Subjects & Class Taught	Duration		Duration in Years/ Months	Salary Drawn (Rs.)
					From	To		
1.								
2.								
3.								
4.								

**TEACHING EXPERIENCE OF UNRECOGNISED SCHOOL**

1. Total Years of Teaching Experience :  Experience in words : \_\_\_\_\_

S. No.	Name & Address of School	Position Held	Subjects & Class Taught	Duration		Duration in Years/ Months	Salary Drawn (Rs.)
				From	To		
1.							
2.							
3.							
4.							

**DETAILS ABOUT****PRESENT****LAST****SERVICE (IF ANY)**

(Please Tick one)

1. Name of the School

:

2. Affiliation of the School

:

3. Full Address

:

  
  
 Phone : 

4. Head of the Institution

:

 Name   
 Contact No. 

5. Post Held

:

6. Subject(s) Taught

:

7. Class(es)

:

  

8. Other Responsibilities (if any)

:

  
  


9. Date of Joining

:

    
 D D M M Y Y

9. Date of leaving (if any)

:

    
 D D M M Y Y

10. Reason of leaving (if any)

:

  
  


11. Your overall experience with this school

:

  
  


11. Are / Were you under service bond ?

:

 Yes  No (if yes, give detail below) :

  
  


12. Total Emolument

:

Rs. \_\_\_\_\_ (in words : \_\_\_\_\_ )

13. Bifurcation of Total Emolument :

Pay Scale	DUE AMOUNT								DEDUCTION		Net Payable Amt.
	Basic Pay	% of D.P.	% of D.A.	H.R.A.	C.C.A.	Conv.	Medical	Total	E.P.F. & ESIC	Others	

## ACADEMIC & PROFESSIONAL QUALIFICATION

COURSE	Passing Year	Board / University	School / College	SUBJECTS				Agg. % of Marks
				S. No.	Name	Max. Marks	Marks Obt.	
<b>HIGH SCHOOL</b>				1				
				2				
				3				
				4				
				5				
				6				
<b>10+2</b>				1				
				2				
				3				
				4				
				5				
<b>Graduation</b> <input type="checkbox"/> B.A. <input type="checkbox"/> B.Sc. <input type="checkbox"/> B.Com. <input type="checkbox"/> Others _____				1				
2								
3								
4								
5								
<b>Post Graduation</b> _____				1				
<b>B. Ed.</b>				<b>SCHOOL TEACHING SUBJECTS</b>				<b>Final Result</b>
				1				
				2				
				<b>PRACTICALS</b>				
				1	Practical Test			
				2	Internal Assesment			
<b>Other</b> _____								
<b>Other</b> _____								

### COMPUTER SKILL (IF ANY)

Name of Course : \_\_\_\_\_

Name of Institution : \_\_\_\_\_

Result : \_\_\_\_\_

Software Known : \_\_\_\_\_

Langauge Known : \_\_\_\_\_

## OTHER INFORMATION

1. Detail of Scholarship / Awards / Honors / Talent or Skills : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Research Work / Publication : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Extra-Curricular Activities or Hobbies of your interest : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Seminars and Courses Attended : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Write about your method of teaching : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Comment about your board handwriting : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Self "SWOT-Analysis"  
(a) My strengths : \_\_\_\_\_  
\_\_\_\_\_  
(b) My Weakness : \_\_\_\_\_  
\_\_\_\_\_  
(c) Opportunities : \_\_\_\_\_  
\_\_\_\_\_  
(d) Threats : \_\_\_\_\_  
\_\_\_\_\_
8. Are you suffered from any major ailment / medical problem ? (if yes, give detail below) :  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Have you ever been convicted by any court of law or any discipline proceeding / enquiry is pending against you or any penalty has been imposed on you ?( If yes, give detail below) :  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. Have you applied in any other school (if yes, give detail) :

S. No.	Name of the School	Post Applied for

11. Have you applied for any governmental post (if yes, give detail below) :

S. No.	Post Applied for	Government Body

12. Is any member of your family employed in Wisdom Public School ? (If yes, give detail below)

Name \_\_\_\_\_ W/o, D/o \_\_\_\_\_  
 Designation \_\_\_\_\_ Teaching in Class & Subject \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_ Phone \_\_\_\_\_

13. Write-up “Why I want to join WISDOM PUBIC SCHOOL” :

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

14. Where do you see yourself in next 3 years : \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

15. Would you like to execute a Service Bond with the School :  Yes  No (if no give reason)

Reason : \_\_\_\_\_  
 \_\_\_\_\_

16. How long would you like to continue in Wisdom Public School, if selected for your desired post, give your comments : \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

17. Expected Salary from this school : Rs. \_\_\_\_\_

18. Expected period after which you can join this school, if selected : \_\_\_\_\_

19. Detail of Documents & Certificates Enclosed :

(Enclose all the available photostate copies (Vertically only) of your documents in the order given below also put a sign of ✓ or X in the bracket given against them.)

- (a) Copy of Teaching Experience Certificate(s) ( )
- (b) Copy of B.Ed. Mark Sheet ( )
- (c) Copy of N.T.T. Certificate (if any) ( )
- (d) Copy of Post-Graduation Mark Sheet (Final Year only) ( )
- (e) Copy of Graduation Mark Sheet (Final Year only) ( )
- (f) Copy of Class 12th Mark Sheet ( )
- (g) Copy of 10th Class Mark Sheet ( )
- (h) Date of Birth Certificate ( )
- (i) Photo ID ( )
- (j) Permanent Address Proof ( )
- (k) Any other document(s) \_\_\_\_\_ ( )

20. **DECLARATION BY THE CANDIDATE :**

I hereby certify that the information provided in this application form are true and correct to the best of my knowledge and belief. I also understand that I will be disqualified from my services if any of the information (before or after my appointment) being found false or incorrect.

Place : \_\_\_\_\_

Signature of Applicant

Date : \_\_\_\_\_

Name : \_\_\_\_\_