

AMERICAN MONTESSORI PUBLIC SCHOOL

L-BLOCK, DLF PHASE II, GURGAON 122002 EMPLOYMENT APPLICATION FORM

INSTRUCTIONS:

- 1. You are requested to fill in this application form clearly in your own handwriting.
- 2. Do not attach any certificate with this application form.

Affix a recent passport-size colour photograph in this space.

Post applied for:		
PERSONAL INFORMATION		
Name (in block letters): Ms./Mr		
Father's Name/Husband's Name:		
Place of Birth:	Nationality:	
Permanent Address:		
Telephone(s):	Mobile No:	
Residential/Correspondence Address:		
Email Id:		
Marital Status:	Number of Children:	
OTHER INFORMATION		
DETAILS OF FOREIGN TRAVEL (IF ANY)		
Destination	Reason for Travel	Year

EDUCATIONAL QUALIFICATIONS

PLEASE GIVE DETAILS OF ALL NATIONALLY RECOGNIZED QUALIFICATIONS AWARDED/RESULTS AWAITED IN CHRONOLOGICAL ORDER.

Qualification	Atte	nded	Year of School/ passing College/	Discipline/Subjects	%age of Marks	Division	
	From	То		University		IVIAIKS	
		20/20020					
DETAILS OF S	<u>CHOLARSHI</u>	<u>PS/PUBLICA</u>	ATIONS/RES	SEARCH WORK/A	WARDS/HONOURS		
SEMINAR &	COURSES	ATTENDE	<u>D</u>				
Seminars/Co	urses	Da	ite	Descript	ion		

PROFICIENCY IN ENGLISH LANGUAGE (WRITE MOTHER TONGUE AT 1)

Language			Read	Write	Speak
1					
2					
3					
DETAILS OF EXTRA-CURRICUL	AR ACTIVIT	TIES/SPOF	RTS/HOBBIES		
WORK EXPERIENCE					
DETAILS OF TEACHING/ADMIN EXP	<u>ERIENCE</u>				
Name of the Institution 1	From	То	Position Held	Subject an Taug	
2					
3					
TOTAL EXPERIENCE (IN YEARS)					
Teaching:		Admin	istration:		
Other (please specify):					
WHAT ARE YOUR STRENGTHS?					
WHY DO YOU WISH TO JOIN AMER					

ARE YOU IN SERVICE PRESENTLY?	Yes/No_	
Last/Current Employer's Name:		
Designation:		
Basic Pay & Gross Salary Drawn:	·	
Scale of Pay:	Total service in the present ca	dre:
Joining time required if selected	:	
GIVE DETAILS OF TWO REFERENCES	S IN THE FIELD OF EDUCATION (*no	relatives please)
Name	Designation/School	Phone/Email
ranic		
1 2		
I. I hereby certify that the informa any information is found to be fa	ation provided is true and to the bealse/incorrect, it will disqualify my	est of my knowledge and belief. continuation at AMPS.
I. I hereby certify that the informa any information is found to be faignature of the Candidate	ation provided is true and to the bealse/incorrect, it will disqualify my	est of my knowledge and belief. continuation at AMPS Place
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		Sr. No
Name:	Post of:	
In what way can you make a c us more about your teaching	difference at AMPS ? If applying for a te philosophy & methodology?	aching post, please tell
	5	

HECKING OF CERTIFICATES (to be tick marked) emarks: 1. Date of Birth / Class 10 Certificate 2. 10 + 2 3. Graduation 4. B.Ed / NTT / B.El.Ed 5. Post Graduation 6. M. Phil / Ph. D 7. Experience Certificates 8. Medical Fitness 9. L.P.C 10. Others Please mention Sd/ - Dealing Assistant		(For Office Use)	
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5. Post Graduation 6. M. Phil / Ph. D 7. Experience Certificates 8. Medical Fitness 9. L.P.C 10. Others Please mention Sd/- Dealing	3.	Graduation	
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7. Experience Certificates 8. Medical Fitness 9. L.P.C 10. Others Please mention Sd/- Dealing	5.	Post Graduation	
8. Medical Fitness 9. L.P.C 10. Others Please mention Sd/- Dealing	6.	M. Phil / Ph. D	
9. L.P.C 10. Others Please mention Sd/- Dealing	7.	Experience Certificates	
10. Others Please mention Sd/ - Dealing	8.	Medical Fitness	
Please mention Sd/ - Dealing	9.	L.P.C	
Sd/ - Dealing	10	. Others	
Dealing		Please mention	
Dealing			
Assistant			
			Assistant