



SAINIK SCHOOL GHORAKHAL, NAINITAL

(Under the aegis of Ministry of Defence)

APPLICATION FORM

Post applied for: _____ on _____ basis under Sainik School Society terms and Conditions.

1. Name (in Capital) _____
2. Name of Father/Husband _____
3. Date of Birth (DD/MM/YYYY): _____
4. Age as on last date of receipt of application _____
5. Sex: Male/Female: _____
6. Whether Married: Yes/No: _____
7. Whether SC/ST/OBC/Differently Abled (if Yes, Specify): _____
8. Whether employed at present (if Yes details, thereof) _____
9. Permanent Address: _____
_____ Pin Code _____
10. Address for Correspondence: _____
_____ Pin Code _____
11. Contact Details: Mobile No. _____ Email id _____
12. Aadhar Card No. _____
13. Educational/ Professional Qualification:

(Paste Passport Size Recent Photograph Here)

Certificate/Degree	Board/University	Year of Passing	Subject Offered	Percentage/ Grade/ CGPA
X/SSC/AISSE				
XII/AISSCE/HSSC				
B.A./B.Sc./B.Com/B.C.A./B.E./B.Tech/ Any Graduation				
M.A./M.Sc./M.Com/M.C.A/ Any Post Graduation				
B.Ed/PTC/JBT				
M.Ed./M.Phil/				
CTET or any state Govt. Exam TET				
Any Other				

14. Computer Literacy _____
15. CTET- Qualified (Primary) _____ CTET- Qualified (Secondary) _____
16. Teaching Experience:

Post Held	CBSE/ICSE	Pay	From	To

17. Co-Curricular activities (Specify interest / achievement) _____
18. Any other relevant information (Specify) _____

19. I solemnly declare that the statements made by me are correct and to the best of my knowledge. I understand that if at a later stage any information is found wrong my candidature can be treated as cancelled.

20. I fully understand that I will be appointed on purely contractual basis and shall have no claim or right to appointment on regular basis nor I will be part of the cadre of teachers/Admin staff in Sainik School Ghorakhal. The school has the right to terminate the services of the employees any time during the term as per rules in vogue.

21. Documents Attached (Self attested copies of all the mark sheets/certificates of educational, professional and experience certificates).

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____

Place: _____
Date: _____

Signature in Full _____
Name: _____

***Note:** Take a printout and bring a hardcopy of this form along with all documents at the time of interview.

For Official use only

Details as given above are verified from the original documents and found correct and eligible for consideration to the Post of _____

Date: _____ Signature _____ Name _____

Interview on _____ and found fit for (in order of preference)

01. _____
02. _____
03. _____