



## For Office Use Only

Final Result for Selection SELECTED / NOT SELECTED

If Yes, Salary.....Rs.

Appointment Date \_\_\_/\_\_\_/\_\_\_ Joining Date \_\_\_/\_\_\_/\_\_\_

Designation \_\_\_\_\_

# DELHI PUBLIC SCHOOL, ETAH

(Under the aegis of The Delhi Public School Society, East of Kailash New Delhi)

DELHI PUBLIC SCHOOL, ETAH - Affiliated To The Central Board of Secondary Education, New Delhi

Address: 5th Milestone, Shikohabad Road, Etah (U.P)

Contacts:- 09756125005, 09756145005

Website - www.dpsetah.com

Email - dpsetah2020@gmail.com

## TEACHER REGISTRATION FORM

Post Applied for: \_\_\_\_\_ /NTT/PTI/DPE/SPOKEN TEACHER/COUNSELOR/

RECEPTIONIST /COORDINATOR/LADYCOACH [PRT/TGT/PGT Subject.....]

(This application form is to be filled in your own handwriting)

### Personal Information

Paste your  
Recent  
Passport  
Size  
Photograph

Mr. / Ms. / Mrs. \_\_\_\_\_ [Name in BLOCK LETTERS]

Sex \_\_\_\_\_ (Male/Female)

Date of Birth \_\_\_/\_\_\_/\_\_\_ (DD/MM/YYYY) Age \_\_\_\_\_ Years

D.O.B in Words \_\_\_\_\_

Religion \_\_\_\_\_ Caste \_\_\_\_\_ Category \_\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

### Correspondence / Contact Address

H/No. \_\_\_\_\_ Locality \_\_\_\_\_ City/Town/Village \_\_\_\_\_

Pin \_\_\_\_\_ Tehsil \_\_\_\_\_ District \_\_\_\_\_ State \_\_\_\_\_

### Permanent Address

H/No. \_\_\_\_\_ Colony \_\_\_\_\_ City/Town/Village \_\_\_\_\_

Pin \_\_\_\_\_ Tehsil \_\_\_\_\_ District \_\_\_\_\_ State \_\_\_\_\_

Telephone No. - Land Line, If Any (with STD Code): \_\_\_\_\_ - \_\_\_\_\_

Mobile No. \_\_\_\_\_  Whatsapp No. \_\_\_\_\_

E-Mail Id \_\_\_\_\_ @ \_\_\_\_\_

Marital Status \_\_\_\_\_ [Married / Unmarried] Nationality \_\_\_\_\_

P.T.O.

**If Married**

Spouse's Occupation \_\_\_\_\_ Mobile phone No. \_\_\_\_\_

**Academic/Professional Qualifications:-**

Examination Passed	Full Subjects Offered	Name of the School/College With Place	Board/ University	Year of passing	Obtained Marks/ Max. Marks	% of Marks
10						
10+2						

**Work Experience**

Name of the Institution	Place	Board/ University	Time Period (mm/yy)		Post	Teaching		Salary Drawn
			From	To		Class	Subjects	

Time period required for joining \_\_\_\_\_ Salary Expected \_\_\_\_\_

Current Salary \_\_\_\_\_

**Declaration**

1. I hereby declare that the information provided by me is true to the best of my knowledge and belief. I will provide the original documents whenever asked for. Rendering false information will disqualify my appointment without any notice or compensation.
2. I shall abide by school rules & regulations.

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

Signature of the Candidate

**For office use only**

Management's Remark: \_\_\_\_\_

\_\_\_\_\_