# ARMY PUBLIC SCHOOL KALUCHAK

## LSB APPLICATION FORM FOR THE POST OF ADM OFFICER IN APS KALUCHAK

### 1

1	PERS	ONAL DATA:			
	(a)	Name in full (Block letters)	:		
	(b)	Son/Daughter/wife of	:		
	(C)	Date of Birth	:		
	(d)	Nationality	:		
	(e)	State	:		
	(f)	Address			
	(g)	Contact Details:-			
	Landline No (with STD Code)		:		
		Mob No	:		
		Email ID	:		
2.	PRES	ENT /PREVIOUS OCCUPATION:	_		
	(a)	Designation of Post		:	
	(b)	Name and Address of Institution	n/Organization	:	
	(c)	Designation of superior In char	ge	:	
	(d)	Contact No of superior (for verif	fication if need be)	:	
	<ul><li>(e) Period of notice you will have to</li><li>(f) What salary are you drawing?</li></ul>		give, if selected?	:	
				:	
3 <u>F</u>	MILY L	IFE			
		(a) Marital status		Single/Married/	Nidowed
	(b)	If married/widowed		Name & occupation of sp	ouse
				No of children with age a	nd sex

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Please paste recent passport size colour photograph Do not staple

### 4 EDUCATIONAL RECORDS: School, College or University

Give details of all exams starting from Secondary School onwards

Examination	Marks	Percentage	Division	Year of	Subjects taken	Name of
	Obtained			passing		University/
						Board/Institute

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8. Merit Scholarship won? If so what?\_\_\_\_

9. Languages you can read write and speak fluently.(a) (b) (c)

achieved.....

10. Any books/articles written? If so, give their titles/ Magazines in which published?

## 11. EXPERIENCE:

Fill the particulars in chronological order starting with your appointment (if there is not enough space attach a separate

sheet).

Experience as year (Exact dates to be indicate	ed)	School/College	Total Exp in Years		
From	То	1			

Include any other post held which are relevant to the field of Education.

#### 12. APTITUDE:

	(a)	Administratiove matters							
	(b)	Other area (Cultural activities):							
13.	(a)	Can you take indoor/outdoor games with boys and girls? Indoor Boys : Outdoor Boys:							
	Girls :	Girls:_							
	Which	major games do you play?		_					
14.	<u>HEALTI</u>								
	(a)	What kind of health do you keep?							
	(b)	Do you need any medical treatment/assistance for the disease you are							
		suffering from							
	(c)	Are you differently abled? Give detail							
15.	<u>CO-Cl</u>	JRRICULAR ACTIVITIES/GAMES ANI	<u>D SPORTS</u>						
	What	co-curricular activities can you teach?							
16.	COMP (a)	<u>UTER KNOWLEDGE (</u> Separate sheet c Have you done any degree/diploma i		ails :_					
	(b)	Any experience on working on comp	uter Details.	: _					
	(C)	Do you own a personal Laptop, if yes	s give details:	:_					
	(d)	Your knowledge of computer hardwa	ire :	: _					
17.	<u>OTHE</u>	OTHER ACTIVITES							
	(a) aspira	In answering please indicate personations you have which you believe will b							
		(i)		_					
		(ii)		-					
18.		Give names of two references, which should know you well personally and have an intimate knowledge of your work (not relatives)							
	(a)	Name:	(b)	Name			_		
		Address		Address: _					
19. /hav		A have not been selected at the LSB n selected for appointment at			_ on	and I	have been		
<u>Agre</u>	eement	:							
20.	lf appo								
	(b) I	agree to abide by the AWES Rule and Regul undertake to serve the school till the end of riod specified/ fixed by the management	lation for Army Public f the final term, ie upto	Schools the finaliza	tion of the res	ults of the	class taught		

 (c) I confirm that I am aware that my services would be liable to transfer in organizational interest at the discretion of (d) I solemnly state the all the above particulars/statements are true to the best of my knowledge and belief.

Date .....

(Signature of applicant)

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