

ARMY PUBLIC SCHOOL KALUCHAK
APPLICATION FOR HOUSEKEEPING STAFF (DAILY WAGER)
(PREFERABLY MATRICULATE OR 10 YEARS SERVICE FOR EX-SERVICEMEN)

Application form for the post of _____

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1 PERSONAL 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 -----

PRESENT /PREVIOUS OCCUPATION:

- (a) Designation of Post : _____
- (b) Name and Address of Institution/Organization : _____
- (c) Designation of superior In charge : _____
- (d) Contact No of superior(for verification if need be) :-----
- (e) Period of notice you will have to give, if selected? : _____
- (f) What salary are you drawing? : _____

FAMILY LIFE

- (a) Marital status Single/Married/Widowed
- (b) If married/widowed Name & occupation of spouse

No of children with age and sex

4. Give particulars of all examination you have passed right from matriculation onwards.

Examination	Board/University	Year	Subject taken	% of marks obtained

5. **Experience** . Fill in particulars in chronological order starting with your first appointment.

PERIOD		Department	Post	Years
FROM	TO			

6. **Health.**

(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 details

7. I solemnly state that all the above particulars/statements are true to the best of my knowledge and belief, I also understand that in case any particulars given above are found to be false at any later date, my services are liable to be terminated without giving any prior notice.

Date

(Signature of applicant)