UNIVERSITY MODEL SCHOOL

Khandari Campus, Agra

APPLICATION FORM

(For the posts of Principal, Teachers, Librarian, P.T Instructor, Computer Instructor and Clerk on contractual basis)

Notes:

- 1. The candidate should fill in the Application Form with Ball Point Pen in her/his own hand writing neatly in CAPITAL LETTERS after carefully reading the instructions as laid down in the advertisement. Applications which are incomplete/unsigned will liable to be rejected without any information.
- Candidate should submit separate Applications Forms for the post of Principal and for each post of Teacher at Sr. no. 1 to 8. Each form should be accompanied the requisite fees separately. See instructions for applicants for details.

Paste your recent, good quality passport sized color photograph here and sign. across

1.	Name o	of the Post:							
2.	Candida	ate's Name in I	Hindi:						
3.	Candida	ate's Name in	English:						
4.	Categor	ry (SC/ST/OBC	C/General):						
5.	Gender	(Male/Female)):						
6.	Nationa	ality:				•••••			
7.	Father's	s/Husband's Na	ame:						
8.	Address	s for Correspon	ndence:						
10.	in Words Marital S	Status (Married/	/Unmarried):					e,	•
(b) 10. 11.]	in Words Marital S Education S.No. I	Status (Married/ nal Qualificati Examination	/Unmarried): ions (Attach Name of	self attested	copies of cert	tificates) Year of	Div., %		•
(b) 10. 11.]	in Words Marital S Education S.No. I	: Status (Married/	/Unmarried):	self attested	copies of cert	tificates)		,	•
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(b) 10. 11.]	in Words Marital S Education S.No. I	Status (Married/ nal Qualificati Examination	/Unmarried): ions (Attach Name of	self attested	copies of cert	tificates) Year of	Div., %	,	•

12.Details of Employment (Only Teaching Experience):

Name of the School/College Held To School/College Held School/College Total (Years & Months) Total (Years & Emoluments & Emoluments)

Total monthly & Adhoc/Temp/Co & Months)

Permanent

13. Details of D	Demand Dr	aft:					
DD No .:			. D	ate:	Amou	ınt:	· · · · · · · · · · · · · · · · · · ·
Name of the Ba	ınk:	• • • • • • • • • • • • • • • • • • • •			. Issuin	g Branch:	
(Note: Write y	our Name	and Add	ress on th	e back of the Do	emand Draft)		
(b) E-Mail	ID (mand	latory):			tc.):		
16. Declaration					hereby certify th	at all the statement	s made in this
	are true, co				ny knowledge and l		
		_			tisement I am eligil s on the date of adv	_	have acquired
	so declare	that I sha		-	and norms prescrib		ng Committee,
(iv) I und	erstand tha	at in the st	ate of any	information bei	ng found false or de	etected incorrect or	incomplete at
any stage of	come into	the notic	e or any	ineligibility bei	ng detected before	e, at or after the	interview, my
					terminated automa	tically without any	prior notice to
		_	•	the University.			
(v) The ir for through				all be treated as f	final in respect of m	y candidature for th	ne post applied
for unough	ппо аррис	uu011 101111	•				
PLACE:					(Signa	ature of the Candida	ate)

Name:

DATE: