



**SWAMI VIVEKANAND SHIKSHAN SANSTHAN SR. SEC. SCHOOL
RAJALDESAR, (CHURU) - 331802**

Website - www.svssfoundation.com

Mobile No. - +919928348375

APPLICATION FORM FOR TEACHING AND NON-TEACHING POST
[TO BE FILLED IN THE CANDIDATE'S OWN HANDWRITING AND CAPITAL LETTER ONLY]

REFERENCE NO. _____

DATE _____

POST DETAILS

POST APPLIED FOR _____
CLASSES TAUGHT _____ MEDIUM _____
SUBJECTS / SPECIALIZATION _____
YOUR SALARY EXPECTATION (MINIMUM SALARY ACCEPTABLE) _____ RS.
IF YOU SELECTED, WHEN CAN YOU JOIN _____

PERSONAL DETAILS

NAME _____	<div>PASTE HERE RECENT PASSPORT SIZE COLOURED PHOTOGRAPH</div>
DATE OF BIRTH _____ AGE ON DATE _____ YEARS _____ MONTHS	
AADHAAR NO. _____ PAN NO. _____	
DRIVING LICENCE (LMV/HMV) _____	
FATHER'S / SPOUSE'S NAME _____	
FATHER'S / SPOUSE'S MOBILE NO. _____	
ADDRESS FOR COMMUNICATION _____	
DISTRICT _____ STATE _____ (INDIA) PIN _____	
MOBILE NO. _____ E-MAIL _____	
CATEGORY (GEN/OBC/SC/ST) _____ NATIONALITY _____ RELIGION _____	

MARITAL STATUS DETAILS

MARITAL STATUS _____
ONLY FOR COUPLE (SPOUSE DETAILS)
IF YOU ARE A COUPLE AND WANT TO JOIN TOGETHER, PLEASE MAIL A COMBINED PDF OF THE APPLICATION.
NAME OF YOUR SPOUSE _____
APPLIED POST _____ CLASSES TAUGHT _____ MEDIUM _____

PRESENT / LAST EMPLOYMENT DETAILS

NAME AND ADDRESS OF SCHOOL / ORGANISATION _____
IF SCHOOL, SPECIFY NO. OF: (A) TEACHERS _____ (B) STUDENTS _____
DATE OF JOINING _____ DESIGNATION ON JOINING _____
PRESENT POST _____ DATE OF APPOINTED AT PRESENT POST _____
CURRENT SALARY: BASICS: RS. _____ ALLOWANCES: RS. _____ TOTAL: RS. _____

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OTHERS DETAILS

MAJOR ILLNESS(ES) (YES/NO) _____ DESCRIBE _____
PHYSICAL HANDICAP/ DISABILITY (YES/NO) _____ DESCRIBE _____
PERSONAL HABITS: DO YOU SMOKE? (YES/NO) _____ DO YOU DRINK? (YES/NO) _____
HAVE YOU EVER BEEN CONVICTED OF ANY CRIMINAL OFFENCE? (YES/NO) _____ IF SO, GIVE DETAILS _____

ACADEMIC & PROFESSIONAL QUALIFICATIONS DETAILS

S. NO.	QUALIFICATION	SUBJECT	MEDIUM (HINDI / ENGLISH)	SCHOOL / BOARD / UNIVERSITY	YEAR	PERCENT-AGE (%)
1.	SECONDARY LEVEL / 10 TH					
2.	SR. SECONDARY LEVEL / 12 TH					
3.	GRADUATION					
4.	POST GRADUATION					
5.	PROFESSIONAL QUALIFICATION					
6.	B. ED. / M. ED.					
7.	ANY OTHER					

EXPERIENCE DETAILS (INCLUDING YOUR PRESENT APPOINTMENT AND WORKING BACKWARD)

S. NO.	ORGANIZATION'S NAME	AFFILIATED TO (CBSE / ICSE / RBSE / OTHER)	POST / NATURE OF WORK	CLASSES TAUGHT	SUBJECTS TAUGHT	MEDIUM (HINDI / ENGLISH)	PERIOD			RE-MARK
							FROM MM/YY	TO MM/YY	TOTAL Y/M	
1.										
2.										
3.										
4.										
5.										

COMMUNICATION SKILLS DETAILS (FLUENCY IN COMMUNICATION)

S. NO.	LANGUAGE	FLUENCY ENOUGH TO TEACH (YES/NO)	READ (YES/NO)	WRITE (YES/NO)	SPEAK (YES/NO)
1.	HINDI				
2.	ENGLISH				
3.					

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TECHNICAL SKILLS DETAILS (DO YOU HAE PROFICIENCY IN COMPUTER APPLICATION / SOFTWARE, IF YOU HAVE SO)

TECHNICAL SKILLS	BEGINNER LEVEL (YES/NO)	INTERMEDIATE LEVEL (YES/NO)	ADVANCED LEVEL (YES/NO)
HINDI AND ENGLISH TYPING			
WINDOWS OPERATING SYSTEM'S KNOWLEDGE			
HARDWARE AND SOFTWARE'S KNOWLEDGE			
LETTER DRAFTING AND EMAIL COMMUNICATION			
MICROSOFT OFFICE TOOL (MS WORD, MS EXCEL AND MS POWER POINT)			
PHOTO AND VIDEO EDITING'S KNOWLEDGE			
SOCIAL MEDIA ADVERTISEMENTS			
ONLINE WORK			
CCTV SURVEILLANCE HANDLING KNOWLEDGE			
OTHER, DO YOU HAVE SPECIALLY _____			

REFERENCES DETAILS

NOTE: REFERENCES (NOT RELATED TO YOU) FROM WHOM CONFIDENTIAL REPORTS ABOUT YOUR WORK, CHARACTER, PERSONALITY, PROFESSIONAL PERFORMANCES AND ACADEMIC ACHIEVEMENTS MAY BE OBTAINED. AT LEAST ONE OF THEM MUST BE H.O.D. / HEAD OF INSTITUTION IN WHICH YOU HAVE WORKED.

S. NO.	NAME	DESIGNATION	ORGANIZATION	ADDRESS	MOBILE NO.
1.					
2.					

TESTIMONIALS ENCLOSED DETAILS

TESTIMONIALS ENCLOSED: (YES/NO) _____

ID PROOF: AADHAAR CARD: (YES/NO) _____ EPIC ID: (YES/NO) _____ PASSPORT: (YES/NO) _____

PAN CARD: (YES/NO) _____ DRIVING LICENCE: (YES/NO) _____ (LMV/HMV) _____

A COPY OF ALL EDUCATIONAL CERTIFICATES: (YES/NO) _____

A COPY OF ALL PROFESSION QUALIFICATION CERTIFICATES: (YES/NO) _____

A COPY OF CHARACTER CERTIFICATE: (YES/NO) _____

A COPY OF EXPERIENCE CERTIFICATES: (YES/NO) _____

LAST 3 MONTHS SALARY SLIP FROM PRESENT WORKING ORGANIZATION: (YES/NO) _____

MEDICAL CERTIFICATE: (YES/NO) _____

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SELF DECLARATION

NOTE: Applicants called for interview will have to bear their own travelling expenses unless otherwise agreed in advance. Attach self-attested copies of all certificates & other documents. Only shortlisted candidates will be called for the interview. The management reserves the right to select or reject your application without assigning any reason. No TA/DA/Other Allowances given.

DECLARATION

I (Name) _____ (Father's Name) _____ hereby certify that the particulars furnished above are correct to the best of my knowledge and belief, I have not concealed any information likely to impair my fitness for employment. If it is revealed later that I have given false/incorrect details or concealed any information, my services shall be termination without any notice or compensation.

If selected, I shall produce:

1. Medical certificate from a recognized hospital / clinic / registered medical practitioner / doctor.
2. Experience certificate from my last employer duly signed by the competent authority.
3. Last 3 months salary slip from present working organization.
4. Character certificate from a government / competent authority.
5. Original certificates for verification.

SIGNATURE: _____

DATE: _____

MOBILE NO. : _____

FOR THE OFFICE USE ONLY
(INTERVIEW COMMITTEE REPORT)

CALLED FOR THE INTERVIEW ON: _____ AT: _____ (AM/PM)

DEMO TAKEN IN CLASS: _____ SUBJECT/TOPIC: _____

SELECTED FOR POST: _____ SUBJECT _____

APOINTMENT DATE: _____ JOINING DATE: _____

CHECKING OF CERTIFICATES (TO BE TICK MARKED)

CERTIFICATE ID PROOF (DOB & ADDRESS)	CHECKED	REMARKS
SECONDARY _____	_____	_____
SENIOR SECONDARY _____	_____	_____
GRADUATION _____	_____	_____
POST GRADUATION _____	_____	_____
B. ED/M. ED. _____	_____	_____
OTHER _____	_____	_____
EXPERIENCE CERTIFICATES _____	_____	_____

SIGNATURE _____

NAME _____
(IN BLOCK LETTERS)

MOBILE NO. _____

SIGNATURE _____

NAME _____
(IN BLOCK LETTERS)

MOBILE NO. _____