

**ARMY PUBLIC SCHOOLS**  
**APPLICATION FOR NON –TEACHING/ADM STAFF**

Application form for the post of \_\_\_\_\_

Details of DD ( DD No \_\_\_\_\_ issue date \_\_\_\_\_ )  
 (DD of Rs 100/- in favour of **ARMY PUBLIC SCHOOL** payable at **HISAR**)

Please paste  
 recent  
 passport size  
 colour  
 photograph  
 Do not staple

**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 -----

**2. 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? : \_\_\_\_\_

**3 FAMILY LIFE**

- (a) Marital status Single/Married/Widowed
- (b) If married/widowed Name & occupation of spouse  
 \_\_\_\_\_
- No of children with age and sex  
 \_\_\_\_\_

4. **EDUCATIONAL RECORDS :** School, College Or University (Give details of all exams starting from class X onwards)

Examination	Marks Obtained/ Max Marks	Percentage	Division	Year of passing	Subjects taken	Name of University/ Board/ Institute
X						
XII						
Graduation						
Post Graduation						
B Ed						
Any other						

5. **EXPERIENCE:**

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

S No	School/ College	Post Designation /	From	To	Total Exp in Years

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
- (a) Are you differently abled? Give details

7. 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: \_\_\_\_\_

**Agreement:**

8. If appointed:-

- (a) I agree to abide by the AWES Rule and Regulation for Army Public Schools
- (b) I solemnly state the all the above particulars/statements are true to the best of my knowledge and belief.

Date .....

.....  
(Signature of applicant)