



Bal Bharati Public School

APCPL-IGSTPP, JHARLI, JHAJJAR, HARYANA - 124141

Application Form for Teaching Staff

Part B

Post shortlisted for: _____

(To be filled in candidate's handwriting)

1. Name Mr./Mrs./Ms. _____

2. Father/Spouse Name: _____

3. Home Address for correspondence: _____

4. Telephone/mobile number: _____

5. Email Id: _____

6. Permanent Address: _____

7. Have you undergone any major surgery in the last five years? If yes, please provide details: _____

8. Please mention the strategies you will utilize if given a class of:

a.) Students with special learning needs: _____

b.) Exceptionally gifted students: _____

9. Details of books/research papers/magazine articles/ blogs/ e-publications authored by you:

10. Any action research conducted and documented:

11. Public speaking exposure/whether you managed any responsibility earlier that required public speaking:

12. Details of educational tours/study visits organized by you:

13. Details of administrative experience/extra responsibilities shouldered by you besides teaching:

14. Details of event/exchange program that you initiated/organized/ managed:

15. Details of participation in Clubs/Committees/Associations/Organizations/ cultural activities/literary activities and the level (School/ college/ zonal/ state/ national):

Activity	Organized by	Year	Achievement

16. Continuous Professional Development: Mention courses from government recognized institutions/agencies (NCERT, SCERT, CBSE, DIKSHA British Council etc.) or other courses.

Workshop/Seminar/ Training attended	Agency	Details	Duration

17. Details of awards/citations/appreciation certificates/scholarships received:

Details of Award/felicitation	Agency	Year	Details (Area of work)

18. Details of any COE Webinar conducted as a resource person (attach the certificates):

19. The exact period after which you can join, if selected:

20. Please give details of two references (other than relatives) from the field of education:

A.) Name: _____ Designation: _____
Phone: _____ Email id: _____
Official address: _____

B.) Name: _____ Designation: _____
Phone: _____ Email id: _____
Official Address: _____

- **Please attach a self-attested certificate stating that no case or complaint has been lodged against you regarding POCSO Act/Corporal Punishment/ Abuse. (Copy attached)**
- **Please attach copies of relevant documents (citations, training certificates etc.)**

Declaration: I hereby certify that all statements made, and information given by me in this application form are true, complete, and correct to the best of my knowledge and belief. In the event of any information or part of it being found false or incorrect before or after the interview or appointment, action can be taken against me by the School and my candidature/ appointment shall automatically stand cancelled/ terminated.

Place: _____ Date: _____
(Full Signature of the Applicant): _____