THE ENGLISH SCHOOL

Latest

Photograph

Umm Al Quwain

APPLICATION FORM FOR THE POST OF :

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A. PERSONAL DETAILS

**1. Name in full (Capital letters):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (As per the passport)

**2. Father’s/Husband’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. Date of Birth & Applicant’s:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **age on date of applying**

**4. Nationality :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. Passport No.(copy encl.) :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Date of Issue :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date of Expiry:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**6. Visa Status(sponsored by) :** Father Husband School

 (Tick the correct one)

**7. Details of Sponsor** : Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Tel.No (O) :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (M):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **8. (a). Local Address** *{ Any Change should be intimated in writing immediately }*

 Building Name / No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Area : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Road : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ P.O.Box : \_\_\_\_\_\_\_\_\_\_\_

 Tel. No: (R): \_\_\_\_\_\_\_\_\_\_\_\_\_\_(O):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(M):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **(b).** **Permanent Address in India:\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**9. Health/Fitness** Height : \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Weight\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Any Health Problem to : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 declare \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**10. Any friend or relative worked / working in the School :**

 **Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relation : \_\_\_\_\_\_\_\_\_\_\_\_\_\_ From \_\_\_\_\_\_\_To\_\_\_\_\_\_**

 **Applicant’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date: \_\_\_\_\_\_\_\_\_\_\_

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**B. (i) ACADEMIC RECORDS**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| No. | PG / Degree / Diploma | Year of Passing | Board /University | Subject ofSpecialization | % of Mark | AttestationsFrom India,Home Dept/UAE Consulate / MOE |
| 1. | Matriculation/Pre Univ.(XII)/Sen.Sec.(XII) |  |  |  |  | Indian Att. : Yes / No |
|  | MOE : Yes / No |
| 2. | B.A./B.Sc. with marks Stmt.(Final)  |  |  |  |  | Indian Att. : Yes / No |
|  | MOE : Yes / No |
| 3. | M.A./M.Sc. withMarks Stmt.(Final) |  |  |  |  | Indian Att. : Yes / No |
|  | MOE : Yes / No |
| 4. | B.Ed./M.Ed./PG Dip/ Montessori Training from Recognized University/Institute With Marks Stmt.(Final) |  |  |  |  | Indian Att. : Yes/No |
|  | MOE : Yes/No |

### (ii). WORK EXPERIENCE IN INDIA

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | Institution’s Name(in short) | From | To | Remarks |
| Subject | Class |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | **Total Experience (in Years)** |  |  |

###  (iii). WORK EXPERIENCE IN GULF COUNTRIES

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | Institution’s Name(in short) | From | To | Remarks |
| Subject | Class |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | **Total Experience (in Years)** |  |  |

**Applicant’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date: \_\_\_\_\_\_\_\_\_\_\_

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 (iv) ANY RELEVANT EXPERIENCE (Training/Workshops/Seminars Conducted / attended with

 supporting documents

|  |  |  |
| --- | --- | --- |
| No. | Name of experience | Remarks |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

C. Specific activities interested in and will contribute to the school

|  |  |  |  |
| --- | --- | --- | --- |
| No. | Name of Activity | Level of Attainment | Mention what way you can contribute to the school |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**\*\* Any entry in this form should be supported by the photocopy of the document. In the absence of documents, your claim will not be considered.**

This is to declare that all the information furnished above are true to the best of my knowledge and belief.

**Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_