



# DIVINE INTERNATIONAL SCHOOL

Nikol-Naroda Road, Near Shukan Bunglows, Nikol, Ahmedabad-382350 (Guj.) India. Tel: +91-79-3558 6718, +91 7567562102

(Affiliated to ICSE Board, Reg. No: GU027) • E-mail : [admin@divineinternational.org](mailto:admin@divineinternational.org) • [www.divineinternational.org](http://www.divineinternational.org)

## APPLICATION FORM

Form NO: 777

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

### Personal Profile

Full Name : \_\_\_\_\_

Surname

Name

Middle Name

Father's / Husband's Name : \_\_\_\_\_

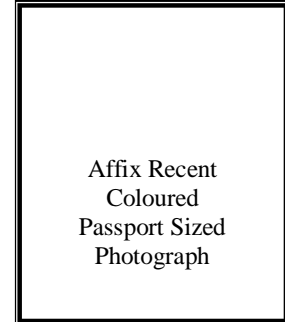
Sex : Male  Female

Present Occupation (Self) : \_\_\_\_\_

Father's / Husband's Occupation : \_\_\_\_\_

Birth Date : \_\_\_\_\_ Religion : \_\_\_\_\_ Nationality : \_\_\_\_\_

Marital Status : \_\_\_\_\_ No. of Children : \_\_\_\_\_ Other Dependants : \_\_\_\_\_



Affix Recent  
Coloured  
Passport Sized  
Photograph

Post Applied for : \_\_\_\_\_

### Address:

Present Address		Permanent Address	
City: _____		City: _____	
Phone (R) : _____		Phone (O) : _____	
Email : _____		Mobile : _____	

### : Educational Profile:

#### Complete Educational Qualifications:

Level	Degree	Stream	Medium	Year	%	Board / University	Main Sub.	Subsidiary
Professional								
Post Graduation								
Graduation								
Higher Secondary								
Secondary								
Any Other								

Preference of Subjects and class			Preference in other areas of interest						
	Subject	Class		Area	Level				
1			1						
2			2						
3			3						
Minimum Expected Consolidated Salary									
Any other expectations									
<b>Tick skills / activities that you can conduct or teach :</b>									
Yoga	<input type="checkbox"/>	Indian Classical Music	<input type="checkbox"/>	NCC	<input type="checkbox"/>	Public Speaking	<input type="checkbox"/>	Dance	<input type="checkbox"/>
Aerobics	<input type="checkbox"/>	Indian Classical Dance	<input type="checkbox"/>	Elocution	<input type="checkbox"/>	Story Telling	<input type="checkbox"/>	Ceramics	<input type="checkbox"/>
Pottery	<input type="checkbox"/>	W. Classical Dance	<input type="checkbox"/>	Photography	<input type="checkbox"/>	Cultural Act.	<input type="checkbox"/>	Astronomy	<input type="checkbox"/>
Craft	<input type="checkbox"/>	W. Classical Music	<input type="checkbox"/>	Horticulture	<input type="checkbox"/>	Environment	<input type="checkbox"/>	Music	<input type="checkbox"/>
Sports (Specify)									
Any other :									

If you also wish to be considered for a special assignment, list relevant preferred areas in order of preference.

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What student activities are you willing to provide guidance for ?

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What proficiencies do you have in computer technology?

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Indicate any major illness in the past 5 years

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Please write your views on teaching career:

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**: Employment Record:**

**(Beginning with most recent)**

Name of Organization : \_\_\_\_\_  
Address : \_\_\_\_\_ Phone No. : (\_\_\_\_) \_\_\_\_\_  
Your Job Title : \_\_\_\_\_ Supervisor's Name / Position : \_\_\_\_\_  
From : \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To : \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Salary Paid : \_\_\_\_\_  
Grades or Subjects taught, if applicable : \_\_\_\_\_  
Duties and Responsibilities : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Reason For Leaving : \_\_\_\_\_

Name of Organization : \_\_\_\_\_  
Address : \_\_\_\_\_ Phone No. : (\_\_\_\_) \_\_\_\_\_  
Your Job Title : \_\_\_\_\_ Supervisor's Name / Position : \_\_\_\_\_  
From : \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To : \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Salary Paid : \_\_\_\_\_  
Grades or Subjects taught, if applicable : \_\_\_\_\_  
Duties and Responsibilities : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Reason For Leaving : \_\_\_\_\_

Name of Organization : \_\_\_\_\_  
Address : \_\_\_\_\_ Phone No. : (\_\_\_\_) \_\_\_\_\_  
Your Job Title : \_\_\_\_\_ Supervisor's Name / Position : \_\_\_\_\_  
From : \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To : \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Salary Paid : \_\_\_\_\_  
Grades or Subjects taught, if applicable : \_\_\_\_\_  
Duties and Responsibilities : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_

**: References :**

Please indicate the name of two persons who know you well but are not related to you.

	<b>1</b>	<b>2</b>
Name :		
Designation :		
Organization :		
Address :	_____	_____
	_____	_____
	_____	_____
Phone :		

\_\_\_\_\_

**Date**

\_\_\_\_\_

**Signature**

\_\_\_\_\_

**Name in block letters**

<b>For Office Use Only :</b>		
The DIS assessment test score		
Qualification		
Ability		
Interpersonal Skills		
Status	(1) Call for Interview <input type="checkbox"/>	(4) Selected <input type="checkbox"/>
	(2) Call for Second Round <input type="checkbox"/>	(5) Rejected <input type="checkbox"/>
	(3) Short List <input type="checkbox"/>	

