



# DA.V. PUBLIC SCHOOL, THANE

Survey No 157, Plot No 31, Tulsidham, Thane (W) 400610

Phone No.: 022-25890954, 022-25890966

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(DIRECTLY MANAGED BY DAV COLLEGE MANAGING COMMITTEE, NEW DELHI)

CANDIDATE PROFORMA 2024-25

Latest Colour  
Photo

(Please ensure that you provide all the required information. Please complete this form in your own handwriting, using CAPITAL LETTERS and ticking the appropriate boxes)

<b>Post Applied for</b>																
<b>Name</b>	_____															
	First Name				Middle Name				Surname / Last Name							
<b>Sex</b>	M		F		<b>Date of Birth:</b>				D	D	M	M	Y	Y	Y	Y
<b>Age</b>					<b>Marital Status:</b>											
<b>Religion</b>					<b>Category</b>				SC / ST / OBC / General Caste _____ / Sub Caste _____							
<b>Nationality</b>					<b>Mother Tongue</b>											
<b>Address for Correspondence:</b>																
_____																
_____																
_____																
<b>City :</b>				<b>Pin Code :</b>				<b>State :</b>								
<b>Tel. No.</b>				<b>Mobile :</b>												
<b>E- mail</b>																

<b>1. Family Information :</b>				
<b>Father's Name :</b>		<b>Occupation :</b>		
<b>Mother's Name :</b>		<b>Occupation :</b>		
<b>Spouse's Name :</b>		<b>Occupation :</b>		
<b>Spouse's Qualification :</b>		<b>Present Organization and Designation (if</b>		
<b>2. Children's Details :</b>				
<b>Name :</b>		<b>Age:</b>	<b>Current Class:</b>	<b>School:</b>
<b>Name :</b>		<b>Age:</b>	<b>Current Class:</b>	<b>School:</b>

### 3. Educational Qualifications:

Qualification	Subjects and specialization	Year of passing	Full time/ Part time/	Name of the School /	Board / University/ institute	Marks (out of)	%
Class X							
Class XII							
<b>Bachelor's Degree</b>							
B.A. <input type="checkbox"/>	1 <sup>st</sup> year						
B.Com. <input type="checkbox"/>	2 <sup>nd</sup> year						
B.Sc. <input type="checkbox"/>	3 <sup>rd</sup> year						
Others _____							
<b>Master's Degree</b>							
M.A. <input type="checkbox"/>							
M.Com. <input type="checkbox"/>							
M.Sc. <input type="checkbox"/>							
M.C.A. <input type="checkbox"/>							
Other _____							
<b>Professional</b>							
Dip. In ECCE. <input type="checkbox"/>							
D.Ed. <input type="checkbox"/>							
B.Ed. <input type="checkbox"/>							
B.P.Ed. <input type="checkbox"/>							
M.Ed. M.P.Ed. <input type="checkbox"/>							
Other _____							
CTET / STET	<input type="checkbox"/> Cleared		<input type="checkbox"/> Not Cleared				
Paper – I <input type="checkbox"/>							
Paper – II <input type="checkbox"/>							
Any Other Qualification (if any)							
Computer Proficiency							

**4. Details of Extra Curricular Activities (Please mention activity, role, level and outstanding achievements, if any):**

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5. Proficiency in Language :			
Language	Read	Write	Speak

**6. DETAILS OF WORK EXPERIENCE :**

Name of the Organization / School and Board Affiliated to CBSE, SSC, ICSE.	Period			Designation	Classes taught	Subjects taught	Remarks Indicate where experience
	From	To	Total Period				
	__/ __/ __	__/ __/ __					
	__/ __/ __	__/ __/ __					
	__/ __/ __	__/ __/ __					
	__/ __/ __	__/ __/ __					
	__/ __/ __	__/ __/ __					
	__/ __/ __	__/ __/ __					
	__/ __/ __	__/ __/ __					
	__/ __/ __	__/ __/ __					

**7. Total Teaching experience** (in years)

**8. Other Professional Experience, if any** (in years)

**9. Details of Last Drawn Salary and Benefits**

- Salary – per annum
- Other benefits received – per annum (medical insurance, accommodation, etc.)

**10. Have you attended the interview earlier at DAV School? (If Yes, name the school)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**11. Declaration :**

I, \_\_\_\_\_ hereby declare that all the information furnished by me in this application is true to the best of my knowledge and belief. You may like to make enquires to the references provided by me. I will produce copies and / or originals of certificates as required at any time.

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

Place : \_\_\_\_\_ Signature : \_\_\_\_\_

- Guidelines :**
- Candidates applying for vacancies other than teaching must fill up the relevant columns only.
  - Please attach with this form self-attested copies of all the relevant documents.
  - Wherever you would like to provide more information, you may add extra sheets.