

**ABU DHABI INDIAN SCHOOL, ABU DHABI**

**APPLICATION FORM FOR THE POST OF**

Latest  
photograph

**A. PERSONAL INFORMATION**

**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. Local Address :** Any Change should be intimated in writing immediately

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

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

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

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

Permanent Address in India: \_\_\_\_\_

**9. Current Drawn Salary:** \_\_\_\_\_ **Expected Salary:** \_\_\_\_\_  
(Please attach a copy of your salary slip)

**10. Health/Fitness**

Height : \_\_\_\_\_ Weight: \_\_\_\_\_

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

declare \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

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

**B.(i) Academic Record**

S.N.	Deg./ Dip. Cert.	Yr.of Passing	Board/ Univ.	Sub.of Specialization	Attestations From India: Home Dept/UAE Consulate Local:MOE/MOHR.Ed		Remarks
					Ind.Att. : Yes/No	MOE : Yes/No	
1.	Matriculation/Pre Univ.(XII)/Sen.Sec.(XII)				Ind.Att. : Yes/No		
					MOE : Yes/No		
2.	B.A./B.Sc. with marks Stmt.(Final)				Ind.Att. : Yes/No		
					Gen.Cert : Yes/No		
3.	M.A./M.Sc. with Marks Stmt.(Final)				Ind.Att. : Yes/No		
					Gen.Cert : Yes/No		
4.	B.Ed./M.Ed./PG Dip/ Montessori Training from Recognized University/Institute With Marks Stmt.(Final)				Ind.Att. : Yes/No		
					Gen.Cert : Yes/No		

**B.(ii) Experience****IN INDIA**

Sl.No.	Institution's Name (in short)	From	To	Remarks	
				Subject	Class
Total No.of years of Experience					

**IN GULF**

Sl.No.	Institution's Name (in short)	From	To	Remarks	
				Subject	Class
Total No.of years of Experience					

Applicant's Signature: \_\_\_\_\_

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

**B.(iii) Any Relevant Experience (Training/Workshops/Seminars Conducted/attended with supporting documents)**

Sl.No.	Name of experience	Remarks

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

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

**V.V.Important: 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 the information furnished above in Parts A, B & C by me is true to the best of my knowledge and belief.

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

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

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

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**FOR OFFICIAL USE**

Preliminary interview conducted by \_\_\_\_\_ on \_\_\_\_\_  
Result: \_\_\_\_\_.

Interview conducted by the Education Committee on \_\_\_\_\_.  
Result of interview : \_\_\_\_\_

Signature & name of dealing officer : \_\_\_\_\_

Appointed on \_\_\_\_\_ on probation against post of \_\_\_\_\_ in the \_\_\_\_\_ shift.

Principal