

AP	PLICA	ATION FOR	THE PO	OST OF	:				
Pre	ferred		Bahatara Mission			Vyapar V Ambikapı		ch 🗌	
01.	Name	(In Full)	•••••	•••••	•••••	• • • • • • • • • • • • • • • • • • • •	•••••	•••••	
02.	Fathe	r's/Husband	l's Nam	e	• • • • • • • • • • • • • • • • • • • •	•••••	• • • • • • • • • • • • • • • • • • • •	•••••	
03.	Age/D	Oate of Birth	•••••	•••••	• • • • • • • • • • • • • • • • • • • •	•••••	•••••	•••••	
04.	Marit	al Status	•••••	• • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	•••••		
05.	Addr	ess	•••••	• • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	•••••		
07.	E-Ma	nct Noil ID	•••••	••••••	WhatsAj		•••••	•••••	Blood Gr.: :: Gen./SC/ST/OBC
	Sr.	Particular	Ye	ear Su	bjects	Board/Co versity	llege/Uni	Aggregate % Marks	Regular/corre spondence
	A1	Secondary							
	A2	Senior Secondary							
	В	Graduation							
	С	Post Graduation							
	D	Professiona Qualification							
	Е								
09). Soci	o, Cultural a	nd othe	r activi	ties: -				
	S.No	Name of Institution		Status		То	Reason	For Disconti	nuation
	A								

10	W	ork	Ex	peri	ence:	-
----	---	-----	----	------	-------	---

S.No	Name, Place, & Telephone no. of the organization worked with	Student Strength (If in A school)	Designation	Details of The Job	Date of Joining	Date and reasons for Leaving	Last Salary drawn (Gross)
	WOINCE WITH	SCHOOL)				Leaving	(01033)

11. Family Details (Father/Spouse & Children, others)

Name	Relation	Occupation	Organization with Complete Address & Tel.	Yearly Income

13. Describe major ailment/ disability (if any):	
14. Expected Salary (Gross) (`)	
15. Time Required for Joining, if selected	
16. Please give three references (Other than	
relatives) with address & contact no.	
Date: Signa	ture of the Applicant
Place:	

Note:

- 1. Please fill the form in your own handwriting
- 2. Please attach one latest size photograph
- 3. All columns should be filled in Ink (No Blank/Vague Information)