

# APPLICATION FORM FOR SELECTION OF ADM SUPERVISOR

Place of Interview : **ARMY PUBLIC SCHOOL, NAGROTA**

1. **PERSONAL DATA:-**

- (a) Name in full : .....
- (b) Son/daughter/wife of : .....
- (c) Date of Birth : ..... (d) Age as on date: ..... yrs
- (e) Address : .....
- (f) **Telephone No:** ..... **e-mail :** .....

2. **Educational Qualification :-**

Exam Passed	Name of Board/University	Year of Passing	Subject Taken	% marks obtained

3. **Experience more than six months.** Fill in particulars in chronological order starting your first appt:-

Period		Name of School/College	Total period	
From	To		Years	Months

4. Are you presently working?

- (a) Appt & Institution : .....
- (b) Salary drawing : .....

I solemnly state that all the above particulars/statements are true to the best of my knowledge and belief. I also understand that in case any particulars given above are found to be false at any later date. My services are liable to be terminated without giving any prior notice.

Dated : .....

(Signature of the candidate)