



**DAV INSTITUTIONS, UP ZONE-B**  
**DAV Sr. Sec. PUBLIC SCHOOL ANPARA, ATP COLONY, SONEBHADRA, UP-231225**  
 (Managed by DAV College Managing Committee, New Delhi-110055)

APPLICATION FORM FOR TEACHING & NON-TEACHING STAFF  
 TO BE FILLED IN LEGIBLE HANDWRITING BY CANDIDATE ONLY

ROLL NO.: DAV/CBT/JAN26/..... (OPTIONAL)

POST APPLIED FOR.....SUBJECT:.....

Already Worked with DAV (Yes/No).....NAME OF BRANCH.....

**PASTE LATEST  
COLOURED  
PHOTOGRAPH**

1. NAME: .....
2. DATE OF BIRTH: ...../...../.....
3. GENDER: ..... AGE AS ON 01.04.2026..... YEARS
4. MARITAL STATUS..... 5. NATIONALITY.....
5. RELIGION..... CATEGORY: (SC/ST/OBC/GEN).....
6. FATHER'S NAME: .....
7. MOTHER'S NAME.....
8. NAME OF SPOUSE (IF MARRIED).....
9. EDUCATIONAL QUALIFICATION(S):

SR NO	QUALIFICATION /EXAMINATION	BOARD/UNIVERSITY	RECOGINIZED YES/ NO	PASSING YEAR	DIVISION & %	SUBJECT (S)
01.	SECONDARY					
02.	HIGHER SECONDARY					
03.	GRADUATION					
04.	POST GRADUATION					
05.	ANY OTHER					

10 .PROFESSIONAL QUALIFICATION(S):

SR NO	QUALIFICATION	BOARD/UNIVERSITY / INSTITUTE	RECOGINIZED YES/ NO	PASSING YEAR	SUBJECT	DIVISION
01.	B.ED.					
02.	M.ED					
03.	CTET					
04.	STET					
05.	ANY OTHER					
06.						

DATE:.....

PLACE:.....

SIGNATURE OF CANDIDATE

11.DIGITAL LITERACY( IN SHORT).....

12.EXPERIENCE DETAILS:... .....YEARS.

SR NO	NAME OF ORGANISATION	BOARD/ UNIVERSITY/	DESIGNATION /POST	MODE OF ENGAGEMENT	FROM	TO	WORK PROFILE/ SUBJECT TAUGHT	CLASSES TAUGHT	SALARY WITHDRAWN
01.									
02.									
03.									

13.SALARY EXPECTATION: .....

14.NOTICE PERIOD REQUIRED :.....

15.PERMANENT ADDRESS: .....

.....

.....PIN.....

16.ADDRESS FOR CORRESPONDENCE :.....

.....

.....PIN.....

17.CONTACT NUMBER(S).....1.....2.....

18. EMAIL ID .....

**SELF DECLARATION :**

- I HEREBY DECLARE THAT INFORMATION(S) FURNISHED BY ME ARE CORRECT TO BEST OF MY BELIEF.
- I UNDERSTAND THAT IN ANY CASE, AT ANY STAGE, IF ANY INFORMATION IS FOUND TO BE FALSE, MY CANDIDATURE WILL STAND CANCELLED.
- IF SELECTED, I SHALL ABIDE BY THE SERVICE TERMS & CONDITIONS OF DAVCMC NEW DELHI-110055

NAME :..... SIGNATURE WITH DATE.....