SAINIK SCHOOL CHHINGCHHIP (MIZORAM)

APPLICATION FOR THE POST OF

						Passpoi	
•	(To be filled in Capital Letters only) Name of post applied for						graph out
Categ	Category (i.e. Gen/SC/ST)						
Fee a	mount						
1.	Name Mr. /Mrs /	Miss					
2.	Father's Name						
3.	Date of Birth (in	figures) DateMonth					
4.	Age as on 01 Ma Complete addre	ar 2018\ess with telephone	rsMonths number (s)	Days		, 	
Distt .		State		Pin.			
Conta	ct No	E.mail	ID				
5.	Place of birth		6. Nationa	ality			
7.	Marital status		if married, nar	me of spou	se		
8.	Number of child	ren					
9.	If Spouse emplo	yed, nature of dut	ties/post and details	of Employe	r		
10.	Academic Qualit	fication (class 10 th	onwards)				
<u>S.</u> <u>No.</u>	Qualification	<u>Discipline/</u> <u>subjects</u>	Name of School/ College/University	Year of Passing	% of marks	<u>Division</u>	
			1				. ,

Cont'd...2/-

<u>S.</u> <u>No.</u>	Qualification	<u>Discipline/</u> <u>subjects</u>	Name of School/ College/University	Year of Passing	% of marks	<u>Division</u>

11. Professional Qualification

S. No.	Qualification	<u>Discipline/</u> <u>Subjects</u>	Name of School college	Year of Passing	% of marks

12. <u>Proficiency in Languages (write mother tongue at Sr. No. 1)</u>

S. No.	Language	Read	<u>Write</u>	<u>Speak</u>
1				
2				
3				

13.	Hobbies/	Other Area	of Interest
		•	

(a)	
(b)	

14. Extra curricular Activities (Attach Certificate, if any)

(a)	
(b)	

Cont'd...3/-

Proficiency in Sports (Attach certificate, if any	15.	Proficiency	in Sports	(Attach	certificate,	if ar	١y)
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S.No.	Name of Sports	Level of participation School/College/University/ State/National	<u>Period</u>

16. Details of Work Experience:

S.No	Name of Institution	From	<u>To</u>	Total Exp in Years/Months	Positions held	Nature of Work

17. Exact period after which you can join if selected

I hereby confirm that the information provided by me as above is true to the best of my knowledge and belief. If any information is found to be false / incorrect, it will disqualify me for employment in Sainik School Chhingchhip.



Date :	 Signature of the candidate