



Funded by the Gujarat State Tribal Educational Society, (TDD) Gandhinagar.
 Managed by The Shantilal Sanghvi Foundation, Mumbai.

Eklavya Model Residential School, Khodada

At & Post.- Khodada, Ta.- Nizar, Dist.- Tapi.

Telephone, 8980156635 E-mail : emrs.khodada@yahoo.in web :- www.emrskhodada.org



- ❖ A fully Residential school for the 6th to 12th std for the Tribal students -
 Funded and owned by Gujarat state Tribal Education society-(TDD-Govt of
 Gujarat) with managed by Shantilal shanghavi foundation -Mumbai

Post Applied for:-

1. Name of the Candidate: -

(In Block Letters)

2. Date Of Birth: -

(In Words)

(In Figures)

3. Address (Permanent) :-.....

.....

4. Postal Address to which communications are to be sent:-

.....

.....

MO. No :- Email id.....

5. Married or Unmarried:-.....

If married. No. of children with their age :-.....

6. Father's

a) Name: -(b) Occupation:-

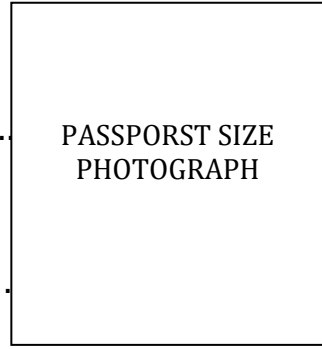
c) Exact Designation in the Organization.....

d) Office Address: -

.....Telephone No :-.....

e) Residential Address: -

.....Telephone No :-



7. Husband's / Wife's

a) Name :-(b) Occupation:-
(Service/Self Employed)

c) Office Address: -
.....Telephone No :-

d) Residential Address: -
.....Telephone No :-

8. Educational Qualification (Starting from Secondary/Higher Secondary or Equivalent Examination.

Name o of The Examination	School/College	Board/University	Years of Passing	Subjects Taken	% of Marks & Division

9. Experience to be filled in the columns provided below:-

Name of the Institution Served/Serving with full address	Period of service from..... To.....	Total Salary Drawn per month	Class Subject taught	Any other duty performed	Reason for Leaving

**10. Co-curricular Activities (Tick only the activities in which you are proficient :-
 Out door games. Indoor games. Literary Activities, Dance, Music, Swimming,
 Organization of students clubs and other.**

.....

❖ Strike off whichever is not applicable.

Particulars of Co-Curricular Activities/Interest/Achievements:-

S. No	Name of the Activity	Level of Participation	Achievement	Remarks

11. Organizational and Administrative Experience :-

S. No	Heads	Name of Responsibility	Name of the School Organization

❖ Strike off whichever is not applicable.

13. References (with full address and designations)

- 1

2.

14. Any other special qualification which you want to furnish

15. Please write in brief that how you propose to give your best to the Institution in case you are employed.

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- NB. 1. Incomplete application will not be considered.
2. Attested copies of Certificates/Degrees must be attached with the application (Check the check List)
3. Application Must be filled in by the candidates own handwriting.

Date :-

Signature of the Candidate.

CHECK LIST OF THE DOCUMENTS PROUCED.

1. Birth Certificate.
2. Graduation/Post Graduation Certificate.
3. Teaching Degree/Diploma/Certificate.
4. Certificate of Experience of the various schools/Organization (S)
5. No Objection Certificate from the previous Institution.
6. List of other credentials.

(For Office Use)

Date of Receipt of Application: -No.....

Post for which applied:-.....

Signature