



# Shri Agrawal Shiksha Samiti

Agrasen Katla, Maharaja Agrasen Marg,  
Agra Road, Jaipur – 302003 (Rajasthan)  
Ph. 0141-2614051

## Application Form For An Employment

To,  
The General Secretary,  
Shri Agrawal Shiksha Samiti,  
Agrasen Katla, Agrasen Marg,  
Jaipur

Affix  
Recent  
Passport  
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Photograph  
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Application for the post of \_\_\_\_\_

01. Name of Applicant \_\_\_\_\_
02. Father's / Husband's \_\_\_\_\_  
Name & Occupation \_\_\_\_\_
03. Present Postal Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
04. Permanent Postal Address \_\_\_\_\_  
(Submit the proof) \_\_\_\_\_
05. Telephone No. \_\_\_\_\_ Mobile No. \_\_\_\_\_
06. Age & Date of Birth \_\_\_\_\_
07. Religion \_\_\_\_\_
08. Whether belong to \_\_\_\_\_
09. Marital Status \_\_\_\_\_
10. Name of Husband / Wife \_\_\_\_\_
11. If Married, number of Children \_\_\_\_\_
12. Detail of Job of Husband / Wife \_\_\_\_\_
13. Language I can speak, read and write \_\_\_\_\_
14. Educational Qualifications \_\_\_\_\_
15. Details of Examination Passed \_\_\_\_\_

Year	Name of Examination	Board / University	Percentage	Year of passing

16. Technical Qualifications if Any. \_\_\_\_\_

17. Details of Previous Employment / Experience.

S.No.	Name of Employer	Post	Period	Reason of leaving

18. Amount of Salary already drawing from present/previous employer \_\_\_\_\_

19. Name and address of two respectable persons,  
other than relatives, to whom Samiti could  
make a reference.

1) \_\_\_\_\_  
\_\_\_\_\_

2) \_\_\_\_\_  
\_\_\_\_\_

20. Additional information I desire to give in \_\_\_\_\_  
support of my application. \_\_\_\_\_

21. Any other field/activities in which you can contribute students.

A) Sports \_\_\_\_\_ B) Cultural Activities \_\_\_\_\_ C) NCC/NSS \_\_\_\_\_

D) Any other \_\_\_\_\_

22. List of document (Photostat) attach with this application. Do not attach the original documents.

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_ 4) \_\_\_\_\_ 5) \_\_\_\_\_

I \_\_\_\_\_ S/o, D/o, W/o \_\_\_\_\_  
the above named applicant do hereby solemnly affirm and declare that the aforesaid  
information given correct to the best of my knowledge and belief and nothing has been  
concealed. If any of the above information is found to be false during the course of my  
employment at a later date, I will be liable to be dismissed summarily.

Date : \_\_\_\_\_

Yours Faithfully

( \_\_\_\_\_ )

Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_