ARMY PUBLIC SCHOOL JANGLOT APPLICATION FOR TEACHING, NON TEACHING AND ADM STAFF (CONTRACTUAL AND ADHOC) THROUGH LSB 2025

Gp D Subje	Staff, ct	form for the post of : PGT/TGT/PRT/A	dm/ 		Latest passport size coloured
					photograph
1.	PER	SONAL DATA:-			
	(a)	Name in full (Block letters)	:		-
	(b)	Son/Daughter/wife of	:		-
	(c)	Date of Birth	:	·	-
	(d)	Nationality	:	·	-
	(e)	State	:	·	-
	(f)	Address	:		-
					_
					-
	(g)	Contact Details :-			
		Landline No (with STD Code)	:		-
		Mob No	:		-
		Email ID (if any)	:		-
2.	PRE	SENT/PREVIOUS OCCUPATION:-			
	(a)	Designation of Post	:		-
	(b)	Name and address of Institution/organization	:		-
	(c)	Designation of superior in charge	:		
	(d)	Contact No of superior (for verificati			
	(e)	Period of notice you will have to give			
	(f)	What salary are you drawing?			
3.		IILY DETAILS:-			
	()			0: 1 /84 : 188/:1	
	(a)	Marital status	:	Single/Married/Widowed	
	(b)	If married/widowed	:	Name & occupation of spouse	
				No of children with age and sex	

2/-

4. **EDUCATIONAL RECORDS:-** School, College Or University

Give details of all exams starting from Secondary School onwards

Examination	Marks Obtained	%age	Division	Year of passing	Subjects taken	Name of University/Board/ Institute

	(Graduation/Post Graduation through corr	respondence or regular
5.	Have you cleared CSB:	CTET/STET :
	(date)	(date)
6.	Name of classes you would prefer to teach	with subject:-
	(a) Classes (b)	Subjects
	Training in NCC, scouting, Music/Art, Dran	natics or other such activities, Give rank, status/proficiency
8.	Merit Scholarship won? If so what?	
9.	Language you can read write and speak flu	uently:-
	(a) (b)	(c)
10.	Any books/articles written? If so, give their	titles/Magazines in which published?

11. **EXPERIENCE**:

Fill the particulars in chronological order starting with your appointment (If there is not enough space attach a separate sheet).

Experience as PGT year (Exact dates to be indicated)		School/College	Subject taught	Classes taught	No. of pupils		Exp in months
From	То				taken	Year	Month

Experience as TGT year (Exact dates to be indicated)		School/College	Subject taught	Classes taught	No. of pupils	Total Exp in years & months	
From	То				taken	Year	Month
Experience as		School/College	Subject	Classes	No of	Total E	
(Exact dates to	be indicated)		taught	taught	pupils	years & months	
From	То				taken	Year	Month
	(Include any	y other post held w	hich are rele	evant to the	field of Ed	ucation)	

			(Include any	other post held v	vhich are rele	vant to the f	ield of Edu	ucation)	
2.	<u>APT</u>	ITUDI	<u>l:</u>						
	(a)	Sub	ject (s) which	n you enjoy teach	ing most?				
	(b)	Oth	er area (Cult	ural activities)	: _				-
3.	(a)	Ca	n you take in	door/outdoor gam	nes with boys	and girls?			
		Ind	oor Boys :		Outdoor Boys	s:			_
		Ind	oor Girls :	<u>.</u>	Outdoor Girls	:			-
		Wh	ich major ga	mes do you play	?				_
4.	<u>HEA</u>	LTH:							
4.	HEA (a)		nt kind of hea	Ith do you keep?					
4.	<u> </u>	Wha Do	you need any	Ith do you keep?	nt/assistance	for the dise			ng
4.	(a)	Wha Do fror	you need any n	y medical treatme	nt/assistance	for the dise	ase you a	re sufferi	-
 4. 5. 	(a) (b) (c)	Wha Do fror Are	you need any you differen	y medical treatme	ent/assistance	for the dise	ase you a	re sufferi	-
	(a) (b) (c)	Wha Do fror Are	you need any you differen	y medical treatme	ent/assistance	for the dise	ase you a	re sufferi	-
	(a) (b) (c) CO-6 Wha	Wha Do fron Are CURR It co-c	you need any n you differen ICULAR AC urricular activ	y medical treatme	ent/assistance letails S AND SPOR ch ?	for the dise	ase you a	re sufferi	-
5.	(a) (b) (c) CO-6 Wha	What Do from Are CURR to co-c	you need any you different ICULAR AC urricular activ	y medical treatmently abled ? Give described in the control of the	ent/assistance letails S AND SPOR ch ? sheet can be	for the dise	ase you a	re sufferi	_
5.	(a) (b) (c) CO-0 Wha	Wha Do fror Are CURR It co-c IPUTI Hav	you need any you differen CULAR AC urricular activ KNOWLE	y medical treatmently abled ? Give described in the control of the	ent/assistance letails S AND SPOR ch ? sheet can be na in compute	TS att) er ? Give de	ase you a	re sufferi	- - -
5.	(a) (b) (c) CO-(What	What Do from Are CURR of the Co-control Have Any	you need any you different You different ICULAR ACT Urricular activ ER KNOWLE Ye you done a	y medical treatmently abled ? Give described ? Give descr	ent/assistance letails S AND SPOR ch ? sheet can be na in compute mputer details	for the dise TS att) er ? Give der	ase you a	re sufferi	- - -
5.	(a) (b) (c) CO-C Wha (a) (a) (b)	Wha Do fror Are CURR It co-c IPUTI Hav Any Do	you need any you different You different ULLAR AC Urricular activ ER KNOWLE Ye you done at you own a per	y medical treatmently abled ? Give described ? Give descr	ent/assistance letails S AND SPOR ch ? sheet can be na in compute mputer details f yes give deta	TS att) er ? Give det	ase you a	re sufferi	- - -

17.	OTHER ACTIVITIES.			
		please indicate personal characteristics, interests and as e valuable to this institution:-	spirations you have	
	(i)			
	(ii)			
18 of you	Give name of two reference or work (not relatives):-	ences which should know you well personally and have a	an intimate knowledg	е
	(a) Name	(b) Name		
	Address	Address		
	Mobile No	Mobile No		
19. have		elected at the CSB Interviews held ato cted for appointment at		
<u>Agree</u>	ement.			
20.	If appointed:-			
and b	(b) I undertake to serve results of the class taug (c) I confirm that I am avinterest at the discretion (d) I solemnly state the	he AWES Rules and Regulations for Army Public School the school till the end of the final term, ie upto the finalizable or a period specified/fixed by the management. ware that my services would be liable to transfer in organ of the management. all the above particulars/statements are true to the best	zation of the	
Date		(Signature of	applicant)	

INSTRUCTION TO CANDIDATES

- 1. Please download and print the application form.
- 2. Fill the name of only one school in a cluster.

OTHER ACTIVITIES

- 3. All details at Ser 1 (Personal data) are mandatory. Fill up in Block Capitals.
- 4. Paste one recent coloured passport size photograph on the form and attach one additional photograph for call letter.
- 5. Send by post. No applications will be accepted via e-mail.
- 6. Please download the challan from concerned school website given separate link and deposit in bank and att one copy of challan with application form as receipt of processing fee.

-5-SUMMARY

APPLICANT NAME		
DATE OF BIRTH	IN FIGURES	TOTAL AGE
		(YEARS MONTHS)
CLASS 10		% OF CLASS 10 TH
CLASS 12 TH		% OF CLASS 12 TH
	TICK MARK ANY ONE QUALIFICATION	% OF SELECTED DEGREE ONLY
	BA BSC(PCM) BSC(PCB) BCA BSC IT NA	
	BA BSC(FCN) BSC(FCB) BCA BSC II NA	ELECTIVE SUBJECTS
GRADUATION	IF GRADUATION IN BA	1
		2
	TICK MARK ANY ONE QUALIFICATION	% OF SELECTED DEGREE ONLY
DOCT CDARLIATION		
POST GRADUATION	MA MSC MCA B.TECH M.TECH NA	
		Teaching Subject in B.Ed
PROFESSIONAL	% in B.Ed	1
QUALIFICATION	B.Ed NO NA	2
	% in M.Ed	Teaching Subject in M.Ed
PROFESSIONAL QUALIFICATION	M.Ed NO NA	1
QUALIFICATION	Wi.eu NO NA	2
	TICK MARK ANY ONE QUALIFICATION	% OF SELECTED DEGREE ONLY
HIGHER EDUCATION	M.PHIL P.HD	
	TICK MARK ANY ONE	% IN APPLICABLE EXAM
	Score YEAR OF	PARTA:
AWES SCORE CARD WITH YEAR	PRT TGT PGT NO NA Card No: PASSING	PART B:
WIIN YEAR	PRT TGT PGT NO NA	
		OVER ALL % :
CTET/STET	YEAR OF PASSING	% IN CTET/STET
CIEI/SIEI	YES NO NA	
TEACHING	CLASSES IN YEARS	IN MONTHS
TEACHING EXPERIENCE	PGT TGT	
	PRT	
	TOTAL EXP	

Dated: _____ (Signature of the applicant)

Challan for remitted LSB processing fee Bank Copy	Challan for remitted LSB processing fee School Coy	Challan for remitted LSB processing fee Individual Copy		
Name of the Bank :	Name of the Bank :	Name of the Bank :		
Name of Candidate	Name of Candidate	Name of Candidate		
Father/Husband's Name :	Father/Husband's Name :	Father/Husband's Name :		
Name of Post :	Name of Post :	Name of Post :		
Contact No :	Contact No :	Contact No :		
Signature of candidate	Signature of candidate	Signature of candidate		
Ser Applied for Proposed fee Amount (in Rs)	Ser Applied for Proposed fee Amount (in Rs)	Ser Applied for Proposed fee Amount (in Rs)		
01 LSB-2025 300/-	01 LSB-2025 300/-	01 LSB-2025 300/-		
In words: Rupees three hundred only	In words: Rupees three hundred only	In words: Rupees three hundred only		
Name of the : Army Public School Janglot School Teh & Distt - Kathua Account No : 50100249047351 Branch Name : HDFC BANK LTD, SHAKUNTLA COMPLEX , OPPOSITE SHAHEDI PETROL PUMP, KATHUA - 184104 (J&K) IFSC : HDFC0002538	Name of the : Army Public School Janglot School Teh & Distt – Kathua Account No : 50100249047351 Branch Name: HDFC BANK LTD, SHAKUNTLA COMPLEX, OPPOSITE SHAHEDI PETROL PUMP, KATHUA - 184104 (J&K) IFSC : HDFC0002538	Name of the : Army Public School Janglot School Teh & Distt – Kathua Account No : 50100249047351 Branch Name: HDFC BANK LTD, SHAKUNTLA COMPLEX, OPPOSITE SHAHEDI PETROL PUMP, KATHUA - 184104 (J&K) IFSC : HDFC0002538		
Branch Name :	Branch Name :	Branch Name :		
Branch Code :	Branch Code :	Branch Code :		
Journal No :	Journal No :	Journal No :		
Date of Deposit :	Date of Deposit :	Date of Deposit :		
Amount :	Amount :	Amount :		
In Words :	In Words :	In Words :		