SHIKSHANA PRASARAKA MANDALI'S

S.P.M. ENGLISH SCHOOL

H. D. School Campus, 156-B, Railway Lines, Solapur, 413001
Mob. 7030906015 E-Mail: spmsolapur24@gmail.com

(Self-Finance School)

APPLICATION FORM
[Office Staff]

Affix Recent Colour Photograph

PERSONAL PROFILE

Full Name_____
Surname Name Middle Name

Father's / Husband's Name: _____

Sex: - Male _____ Female _____

Date of Birth_____ Religion: _____ Cast: Category_____

Marital Status:_____ No. of Children: _____ Other Dependents: _____

POST APPLIED FOR:

ADDRESS

Present Address		Permanent Address

Email _____

Mobile_____

EDUCATIONAL QUALIFICATION

Level	Stream	Medium	Year	Parentage	Board / University	Subject	Regular or Correspondent
X							
XII							
Graduation							
Post Graduation							
BBA/MBA							
Tally							
Typing Speed							

EMPLOYMENT RECORD

S.N.	Name of the Organization	Work Handled	Total Experience
1			
2			
3			
4			
5			

1. Notice: Period required to get relieved from the present institution. _____

2. Last salary drawn _____

Date: / / Signature Name

REMARK

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PRINCIPAL SIGN