



ARMY PRE-PRIMARY SCHOOL VARANASI CANTT

APPLICATION FORM FOR APPOINTMENT OF CLERK

1. Name :
2. Date of Birth :
3. Husband/Father's Name & Profession :
4. Postal Address :
5. Contact No. Tele : Mob.

Please paste recent passport size colour photograph Do not staple

6. **Educational Qualification :**

| S.No. | Year | Degree /Cert. | Institution | Subjects taken | Per. (%) | Remarks |
|-------|------|---------------|-------------|----------------|----------|---------|
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7. **Experience :**

| Serial | Duration | | Institution | Salary |
|--------|----------|----|-------------|--------|
| | From | To | | |
| (a) | | | | |
| (b) | | | | |

8. Please attach Medical Fitness Certificate : _____

Place :

Signature

Date :

(Name)

- Note** : 1. Please provide complete details.
2. Attach Photostat of all certificates as mentioned above.
3. Attach medical certificate after getting appointment letter.