



DMI FOUNDATION

DFT Group of Schools

4/26A, ST.PATRICK CHURCH 2ND ROAD, ST.THOMAS MOUNT, CHENNAI 600 016.
PHONE: 044 22339039 E-Mail: dmifoundation.schools@gmail.com



APPLICATION FOR TEACHING POSITIONS

Name of the DFT School Applied for

Position Applied for

Department

Name: (In BLOCK LETTERS)

Mr./Ms

(First)

(Middle)

(Surname)

Briefly describe your Educational Philosophy

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Address:

Present

Permanent

Telephone (with area code)..... Mobile :

E-Mail:

Date of Birth:/...../..... Age: Yrs

Nationality:

Blood Group:

ACADEMIC QUALIFICATIONS:

Qualification	Board (CBSE, MATRIC, ICSE, etc.)/ Univ.	Major Subjects	Year	Grade/Div.
Grade 10				
Grade 12				
Under Graduate				
Post Graduate				
Professional e.g. B Ed				
Other				

EMPLOYMENT HISTORY (Attach additional sheet if required):

Name of the Institution	From	To	Subjects Taught	Salary Details	Reason for Leaving

GAPS IN YOUR EMPLOYMENT (IF ANY):

Please provide details of any gaps in your employment history, e.g. a sabbatical year or parental leave.

Year	Reason

PROFESSIONAL DEVELOPMENT:

Please provide details of any professional development or training (attended or conducted) that you have received in the last 5 years which you consider to be relevant to the role for which you have applied.

Professional development or training	Dates

OTHER INTERESTS:

Game/Activity/Hobby	Level of Proficiency Club/School/College/Univ./State	Achievements (if any)

LANGUAGES KNOWN (write fluent, fair or slight):

Languages	Speak	Read	Write

FAMILY MEMBER DETAILS:

Marital Status: _____

No. of Children (if Any): _____

Name of the Family Member	Gender (M/F)	Relation	Age	Qualification	Occupation

REFERENCES (Other than relatives):

Name	Designation / Occupation	Address	Period for which he/she knows you	Capacity in which he / she knows you

GENERAL INFORMATION:

1. Are you related to any one working in DFT Group? Yes No

If Yes, Name & Relationship:

2. Briefly describe your career goals & aspirations:

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3. Why do you want to work in DFT Group of Schools?

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4. Any special points you wish to bring to the notice in support of your candidature:

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5. If selected when you can join duty?

6. Minimum salary expected

7. Person to be contacted in case of emergency:

Name:

Full Address:

Mobile No:

Certified that all the information given in this application is true to the best of my knowledge

- i) Should any information stated by me in this application be in-correct, my employment with you is liable to immediate termination without payment of any compensation thereof.
- ii) I declare that I have not been convicted previously by any court of law.
- iii) Should there be any changes in the particulars given by me in this application, I shall immediately inform the school office about the same.

Place:

Date:

Signature of the applicant

(office use only)			
SCHOOL INTERVIEW			
Name of the School			
Date of the Interview		Venue	
List of Original Certificates Verified			
Degree	Month & Year of Passing	Class/Division	Certificate No.
U.G.			
P.G.			
B.Ed.			
Experience Certificates			
Observations on Demo Classes			
Class:	Subject:	Topic:	
Language (10)	Clarity of the content (10)	Delivery (10)	Interaction with the students (10)
Subjects Recommended	Classes Recommended	Subjects Recommended	Classes Recommended
Recommendation			
Signature of the Expert 1	Signature of the Expert 2	Signature of the Expert 3	
Principal Recommendation			Signature of the Principal
Campus Superior Recommendation			Signature of the Campus Sup.
DFT INTERVIEW			
Date of the Interview		Venue	
Recommendation with Salary			
Signature of the DFT. Rep. 1	Signature of the DFT. Rep. 2	Signature of the DFT. Rep. 3	
Remarks			
Correspondent	Director	Secretary	
Managing Trustee/Chairman Approval	Approved / Not Approved	Salary Fixed	
Date of Approval			Managing Trustee