



# Somerville School

(Administered by : Lott Carey Baptist Mission in India)  
**BLOCK - H, SECTOR ALPHA-II, GREATER NOIDA**

## PERSONAL PROFILE

POSITION APPLIED FOR				SPACE FOR RECENT PASSPORT SIZE PHOTOGRAPH	
NAME					
MAILING ADDRESS					
PHONE NO. OFFICE :		RESIDENCE			
PERMANENT ADDRESS					
PHONE NO.					
NATIONALITY	RELIGION	AGE (Years)	DATE OF BIRTH	PLACE	STATE
IDENTIFICATION MARKS					BLOOD GROUP
1)					
2)					
HEIGHT (Cms)	WEIGHT (Kgs)	EYE SIGHT IF CORRECTED POWER USED			
		RIGHT :		LEFT :	
LANGUAGES KNOWN - Please mention in order of proficiency - Mother Tongue First					
READ		WRITE		SPEAK	
HAVE YOU EVER BEEN INTERVIEWED FOR ANY POSITION IN SOMERVILLE SCHOOL? IF YES, GIVE DETAILS					
<b>FAMILY BACKGROUND</b>					
FATHER'S NAME				OCCUPATION (If retired, last position held)	
MOTHER'S NAME				OCCUPATION (If retired, last position held)	
ADDRESS					
NAME OF SPOUSE (If married)				OCCUPATION	
MARITAL STATUS : UNMARRIED / MARRIED / WIDOW / WIDOWER / DIVORCEE					
NO. OF CHILDREN : MALE :			FEMALE :		
HAVE YOU ANY RELATIVES WORKING IN SOMERVILLE SCHOOL? IF YES, GIVE DETAILS OF NAME, DESIGNATION & RELATIONSHIP			HAVE YOU ANY RELATIVES WORKING FOR ANY OTHER PUBLIC SCHOOL? IF YES, GIVE DETAILS OF NAME, DESIGNATION & RELATIONSHIP		

**ACADEMIC ACHIEVEMENTS** (Enclose attested photocopies of relevant certificates)  
**DETAILS OF ALL EXAMINATIONS PASSED (HIGH SCHOOL ONWARDS)**

EXAMINATION/ DEGREE/ DIPLOMA	SCHOOL/COLLEGE/UNIVERSITY WITH ADDRESS	YEAR OF PASSING	PRINCIPAL SUBJECTS	CLASS/ GRADE/ DIVISION	% MARKS

STATE REASONS FOR GAPS, IF ANY :

**TRAINING (PROFESSIONAL / VOCATIONAL)**

ORGANIZATION	NATURE OF TRAINING	FROM	TO

DETAILS OF PUBLICATIONS, THESIS, IF ANY

EXTRA CURRICULAR ACTIVITIES / HOBBIES

**EXPERIENCE**

PRESENT / LAST POSITION

ORGANISATION / INSTITUTION (with full address)

JOINED AS

DATE

PRESENT POSITION

DATE

BRIEF DESCRIPTION OF POSITION HELD :

**EMOLUMENTS****MONTHLY****ANNUALLY**

BASIC

D.A.

HRA / LEASE AMOUNT

CONVEYANCE

OTHERS - SPECIFY :

**MONTHLY SALARY Rs.**

PROVIDENT FUND @ \_\_\_\_\_ %

L.T.A

MEDICAL

BONUS/PERFORMANCE INCENTIVE

SUPERANNUATION

OTHERS - SPECIFY :

**ANNUAL SALARY****Rs.**

SALARY EXPECTED

JOINING TIME REQUIRED : \_\_\_\_\_ DAYS

**PREVIOUS ASSIGNMENTS**

PERIOD		ORGANISATION / INSTITUTION WITH ADDRESS	POSITION HELD AND BRIEF DESCRIPTION OF WORK	ANNUAL SALARY
FROM	TO			

STATE REASONS FOR GAPS, IF ANY

**REFERENCES OTHER THAN RELATIVES**

1.

2.

3.

**ANY ADDITIONAL INFORMATION YOU WISH TO PROVIDE**

**DECLARATION**

I hereby declare the particulars as given above are true and any false statement contained in the application shall automatically rescind the contract of employment

Date :

Place :

Signature of Applicant

WE APPRECIATE YOUR INTEREST IN SOMERVILLE SCHOOL AND THANK YOU FOR THE TIME YOU HAVE TAKEN TO PREPARE THIS APPLICATION.

**FOR INTERNAL USE**

PRELIMINARY INTERVIEW NOTES

FINAL INTERVIEW NOTES

**DECISION**