



DAV College Managing Committee
Chitragupta Road, Paharganj, Delhi

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here

DAV Staff Recruitment- 2025

Application Form (Phase I) for Teaching and Non-Teaching Staff

KINDLY FILL THE WHOLE FORM. WRITE N/A WHEREVER NOT APPLICABLE AS PER YOUR POST/SUBJECT.

Post Applied For:

School Applied For:

(Please tick and fill whichever is applicable)

| | | |
|--------------------------|---|------------------------------------|
| <input type="checkbox"/> | Teaching post <i>(Please mention post applied for - e.g. PGT/TGT/PRT/Nursery Teacher)</i> | Mention Subject applied for |
| | | |
| <input type="checkbox"/> | Non-Teaching Post <i>(Please mention post applied for)</i> | |
| | | |

Personal Information:

First Name: _____ Last Name: _____

Father's Name: _____ Mother's Name: _____

Nationality: _____ Religion : _____

Mother Tongue: _____ Marital Status : Married Unmarried

Date of Birth: ____/____/____ (dd/mm/yyyy) Age years Gender : Male Female

Registered Mobile Number: _____ WhatsApp Number: _____

Permanent Address: _____

_____ City: _____ State: _____

Pin code: _____ Email Address: _____

| Educational Qualifications | Year of Passing | Regular / Correspondence | Full Name of College / Institute & City | Subjects Studied | Percentage |
|---|------------------------|---|--|-------------------------|-------------------|
| Post Graduation -1 <input type="checkbox"/> M.A. <input type="checkbox"/> M.Sc. <input type="checkbox"/> M.Com. <input type="checkbox"/> M. Phil. <input type="checkbox"/> M.C.A. <input type="checkbox"/> M.F.A. <input type="checkbox"/> M.P.Ed. Any other _____ | | | College : _____ City: _____ University: _____ | Major Ancillary | % % |
| Post Graduation -2 (if applicable) <input type="checkbox"/> M.A. <input type="checkbox"/> M.Sc. <input type="checkbox"/> M.Com. <input type="checkbox"/> M. Phil. <input type="checkbox"/> M.C.A. <input type="checkbox"/> M.F.A. <input type="checkbox"/> M.P.Ed. Any other : _____ | | | College : _____ City: _____ University: _____ | Major Ancillary | % % |
| Graduation <input type="checkbox"/> B.A. <input type="checkbox"/> B.Sc. <input type="checkbox"/> B.F.A. <input type="checkbox"/> B.P. Ed. <input type="checkbox"/> B.C.A <input type="checkbox"/> B.Com. Any other _____ | | | College : _____ City: _____ University: _____ | Major Ancillary | % % |
| Training Qualification a) Nursery/Montessori Training / P.G. Diploma in Pre-School Edu. The Nursery training is from an institute that is recognised from <input type="checkbox"/> State Govt. <input type="checkbox"/> National Council of Teacher Education (NCTE) Any other _____ | | | Institute: _____ _____ City: _____ University: _____ Duration of Course: _____ | | % % |
| B.Ed. <input type="checkbox"/> Completed <input type="checkbox"/> Not Completed | | | | | % % |
| M.Ed. <input type="checkbox"/> Done <input type="checkbox"/> Not Done | | | | | % % |
| Central Teacher Eligibility Test (CTET) | | Paper –I <input type="checkbox"/> Qualified <input type="checkbox"/> Not Qualified Paper –II <input type="checkbox"/> Qualified <input type="checkbox"/> Not Qualified | | | % % |
| State Teacher Eligibility Test | | Paper –I <input type="checkbox"/> Qualified <input type="checkbox"/> Not Qualified Paper –II <input type="checkbox"/> Qualified <input type="checkbox"/> Not Qualified | | | % % |
| Any other Qualification | | | | | % % |
| Have you done Computer course, if yes, mention the name of the course and its duration. | | | Institute: _____ City: _____ Duration of Course: _____ | | |

School Education

| | Name of the School & City | Year of Passing | Subjects | Board | Medium of Instruction | Second Language | % Scored |
|----------|--------------------------------------|------------------------|-----------------|--------------|------------------------------|------------------------|-----------------|
| Std. XII | City: _____ | | | | | | % |
| Std. X | City: _____ | | | | | | % |

Proficiency in Computers : Yes No

Whether working/worked in any DAV school : Yes No

If Yes, Name of the DAV School: _____

Year/s when worked/since when working _____

Total Experience (in years): _____

| Name of School | Post and Subject | Classes Handling | Date of Joining | Date of Relieving | Experience | Salary drawn |
|----------------|------------------|------------------|-----------------|-------------------|------------|--------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Are you currently employed? Yes No if yes, please give particulars of present job below.

Languages Known :

To write 1. _____ 2. _____ 3. _____ 4. _____

To speak fluently 1. _____ 2. _____ 3. _____ 4. _____

How can you contribute to the school besides teaching your subject?

Select your Interest area(s)

| | | |
|--|--|--|
| <input type="checkbox"/> Games and Sports | <input type="checkbox"/> Yoga | <input type="checkbox"/> Art and Crafts |
| <input type="checkbox"/> Organizing Events | <input type="checkbox"/> Painting | <input type="checkbox"/> Music |
| <input type="checkbox"/> Drama/Nukkad | <input type="checkbox"/> Dance | <input type="checkbox"/> Robotics |
| <input type="checkbox"/> Career Counseling | <input type="checkbox"/> Literary Activities | <input type="checkbox"/> SEWA & community welfare projects |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

VERY IMPORTANT PAGE TO PROCESS YOUR APPLICATION

Check List of Self Attested Testimonials (as applicable) to be attached along with the Application Form. PLEASE DO NOT ATTACH ORIGINAL DOCUMENTS.

| | Verified by School | | Verified by School |
|----------------------------|--------------------------|--|--------------------------|
| 1) Std. X | <input type="checkbox"/> | 7) NTT (Nursery Training Certificate) | <input type="checkbox"/> |
| 2) Std. XII | <input type="checkbox"/> | 8) CTET / STET (Pass Certificate) | <input type="checkbox"/> |
| 3) U.G. Degree Certificate | <input type="checkbox"/> | 9) Experience Certificates | <input type="checkbox"/> |
| 4) P.G. Degree Certificate | <input type="checkbox"/> | 10) Last Salary Slip | <input type="checkbox"/> |
| 5) B.Ed. Certificate | <input type="checkbox"/> | 11) Copy of Aadhar Card / Passport / Any other | <input type="checkbox"/> |
| 6) M.Ed. Certificate | <input type="checkbox"/> | 12) 2 Recent Passport size Photographs | <input type="checkbox"/> |

1. Tie your Application Form with a Tag, so that all attached testimonials are safe. Write clearly on your Envelope the Post Applied.
2. After the results of CBT 2025 Examination, there will be a 'Class Demonstration' for Candidates who qualify in CBT 2025. Date and Time will be intimated to you either by e-mail / SMS.
3. E-mail / SMS to appear for 'Interview' will be sent only to the 'Short Listed Candidates' after the Class Demonstration.
4. The 'Original Certificates' and Testimonials should be produced at the time of Interview.
5. No TA / DA will be paid for Interview.

| Declaration by the Applicant |
|--|
| I _____ |
| S/D/W/o _____ |
| hereby declare that all the information provided in this Application Form is true and correct to the best of my knowledge and belief. |
| I understand that if any information is found to be incorrect or misleading, my application may be rejected, and I may be disqualified from the recruitment process or my Appointment may be Terminated. |
| Date: ____/____/____ |
| Place: _____ |
| Signature: _____ |
| Name: _____ |

SELECTION OF CENTRE BY CANDIDATE FOR CBT EXAMS – 2025

ATTACH TO CANDIDATE'S APPLICATION :

Candidate Name : _____

Mobile Number : _____ Email Id : _____

D.A.V. Public School, VELACHERY, TAMILNADU

D.A.V. Public School, SAFILGUDA, HYDERABAD

D.A.V. Public School, KUKATPALLY, HYDERABAD

Matrusri D.A.V. Public School, MIYAPUR, HYDERABAD

Brahm Prakash D.A.V. School, MIDHANI, HYDERABAD

DAV BDL Public School, BHANOOR, TELANGANA

Bhavya Cements DAV School, DACHEPALLY, ANDHRA PRADESH

DAV Public School (Dr. N.T.T.P.S. Campus) Ibrahimpatnam, VIJAYAWADA

D.A.V. Public School, Wadi, KARNATAKA

Signature of Candidate

Date : _____