



# EDUCATION BAY

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## JOB APPLICATION FORM

### PERSONAL INFORMATION

|                                 |  |        |  |
|---------------------------------|--|--------|--|
| NAME                            |  | DATE   |  |
| FATHER'S / HUSBAND'S NAME       |  |        |  |
| FATHER'S / HUSBAND'S OCCUPATION |  |        |  |
| ADDRESS                         |  |        |  |
| PHONE                           |  | E-MAIL |  |

|                                     |  |
|-------------------------------------|--|
| APPLYING FOR THE POST OF            |  |
| SUBJECT(S) THAT YOU PREFER TO TEACH |  |

LEVEL(S) PREFERRED :  PRE-PRIMARY  PRIMARY  SECONDARY

### ACADEMIC QUALIFICATION:

| QUALIFICATION   | SUBJECTS | YEAR | INSTITUTION |
|-----------------|----------|------|-------------|
| MATRIC/ O LEVEL |          |      |             |
| INTER / A LEVEL |          |      |             |
| GRADUATE        |          |      |             |
| POST GRADUATE   |          |      |             |

|                     |  |
|---------------------|--|
| COMPUTER KNOWLEDGE: |  |
|---------------------|--|

### WORK EXPERIENCE:

| INSTITUTION | POSITION | YEARS OF SERVICE |
|-------------|----------|------------------|
|             |          |                  |
|             |          |                  |
|             |          |                  |

|                |  |                 |  |
|----------------|--|-----------------|--|
| DEPENDANTS     |  | MARITAL STATUS  |  |
| PLACE OF BIRTH |  | DATE OF BIRTH   |  |
| RELIGION       |  | EXPECTED SALARY |  |

### MEDICAL PROFILE

|              |                              |                             |              |                              |                             |
|--------------|------------------------------|-----------------------------|--------------|------------------------------|-----------------------------|
| HYPERTENSION | <input type="checkbox"/> YES | <input type="checkbox"/> NO | SKIN DISEASE | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| DIABETIC     | <input type="checkbox"/> YES | <input type="checkbox"/> NO | MIGRAINE     | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| ASTHAMA      | <input type="checkbox"/> YES | <input type="checkbox"/> NO | OTHER        |                              |                             |
| ALLERGIC TO: |                              |                             |              |                              |                             |

ANY OTHER INFORMATION YOU WOULD LIKE TO GIVE ABOUT YOURSELF:

WHY DO YOU PREFER TO BE A TEACHER? (Those applying for a post other than that of a teacher need not answer this question)

HAVE YOU VISITED ANY PART OF THE WORLD OUTSIDE PAKISTAN ?

FROM WHICH PART OF THE WORLD ARE YOU IMPRESSED AND WHY?

WHAT LANGUAGES SHOULD OUR CHILDREN LEARN TO MEET THE FUTURE CHALLENGES?

ONE ADVICE TO CHILDREN:

ANY SUGGESTION(S) FOR IMPROVEMENT OF SCHOOLS' SYSTEM IN PAKISTAN:

**WRITE AN ESSAY ON ANY ONE OF THE FOLLOWING TOPICS:**

