



**Eklavya Model Residential School (EMRS) Shamlaji-2**  
**Village- Mondhari, Post- Nandoj**  
**Block- Bhiloda, Distt- Arvalli (Gujarat)- 383 245**

**Email: [emrsshamlaji2hmt@rediffmail.com](mailto:emrsshamlaji2hmt@rediffmail.com)**

**Website: <https://emrsshamlaji2.org.in>**

**APPLICATION FORM FOR GUEST FACULTY**  
**(FILL ALL ENTRY IN CAPITAL LETTERS)**

**Name of the Post Applied For.....**

1. Name of the Candidate :.....

2. Father's /Husband's Name : .....

3. Date of Birth :.....

4. Category (Gen/SC/ST/OBC/ESM):.....

5. Gender :.....

6. Permanent Address :.....  
:.....  
:.....  
:.....

7. Nationality :.....

8. Contact No. : .....

9. E-mail ID.....

10. Correspondence Address:.....  
:.....  
:.....  
:.....

11. Have you Served in this School earlier (Yes/No):.....

12. If yes, the duration of Service:.....

*Affix recent  
passport size  
colour photograph  
(Self-attested  
and enclose*

13. **Educational Qualification** (attach self-attested Photocopies of all Certificates and Mark sheets)

Edn Qualification	Name of Board / University	Year of Passing	Division /Grade	Total Marks	Marks Secured	% of Marks
Class X						
Class XII						
Graduation (BA/BSc/ /BCom)						
Post Graduation (MA/MSc/ /MCom)						
BEEd						
Any Other Qualification						

14. Any other Information:.....

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15. Have you ever been punished during your service or convicted by a court of law? (Yes/No):.....

16. Were you at any time declared medically unfit or asked to submit your resignation or discharged or dismissed? (Yes/No):.....

17. Do you have any case pending against you in any court of law? (Yes/No).....

18. **Experience:** (attach self-attested Photocopies)

Sr No	Name of the Organization	Type of Organization (Government / Private)	Designation	Nature of Work	Time period	
					From	To

**DECLARATION**

Certified that all the information furnished above by me is true, complete, and correct to the best of my knowledge and belief. I understand that in the event of any information found false/incorrect/suppressed or any ineligibility being detected before or after the interview/selection, my candidature is liable to be cancelled /my services are liable to be terminated and NSTI Kanpur will not entertain any correspondence in this regard.

Place:.....

Date:.....

**Full Signature of the Applicant**

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**(For School Office use only)**

Whether the applicant is eligible or not eligible (Yes / No).....

Remarks (in case of not eligible /others): .....

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Signature of In-Charge, Scrutiny Cell

Name:.....

Designation .....