

CATHOLICATE & M.D SCHOOLS

(CORPORATE MANAGEMENT)

DEVALOKAM, KOTTAYAM-04 Ph: 0481-2571485

Email: cmdschools@gmail.com, Web: cmdschools.org

Affix Photo

APPLICATION FOR APPOINTMENT

To, The Manager,						
Sir, With reference to the notification dated						
1. Post applied for	:					
2. Name of the applicant	:					
3. Full address to which communications are to be sent with Pin code.	:					
Telephone number (Land & Mobile No.)	:					
WhatsApp No. E-mail Id	: :					
4. a) Age and Date of Birthb) Sexc) Marital Status	: :					
5. Religion & Community	:					
6. Father's Name	:					
Permanent Address Occupation	: :					
If employed, name of institution	:					

7. Na	me of spouse		:			
Occupation			:			
If e	mployed, name of i	nstitution	:			
8. Qu	alifications					
	Academic		:			
	Professional		:			
	Eligibility Test		:			
		Acad	emic Qualificat	tions		
No.	Course	Optional	Reg. No	University/	Year of	% of
		subject		Board	passing	Mark
		Profess	sional Qualifica	tions	ı	
		Eligil	bility Qualificat	tions		
No.	Name of Test	Conducting Agency	Reg. No.	Month & Year of passing	Certificate No.	Date

9. Ad	itional Qualification if any :	
10. Ez	perience if any :	
	I hereby declare that the details furnished above are true to the best of my belief.	
Place		
Date	Signature of the application	ant

N.B: Original Qualification Certificate should be produced at the time of interview.

Please enclose self attested copies of Certificates, Final mark lists of qualifying examinations. If qualified from out of Kerala, equivalency certificate should be produced. Name of post applied should be mentioned on envelop. Without which the application will not be considered at all.