

ओ३म Smt Swarn Lata Sethi

D.A.V. PUBLIC SCHOOL (Senior Secondary Affiliated to C.B.S.E.)



Mausam Vihar, Delhi-110051 Phone: 22531745 Email: slsdavps@yahoo.com Web: www.slsdavps.com



BRITISH COUNCIL INTERNATIONAL SCHOOL AWARD 2016–2019

Attach a self attested passport size photograph

enai No.			APPLICATION FORM							
he	Manager/Chairn	nan					Date			
an	n enclosing herev	with my application					B. Astt./Lab Astt./ Lab			
tte	endant/ Peon/Fen	nale attendant/ Dri	ver/Conductor/any	other s	specific profi		A Amelia difere			
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		me of the applicant (in block letters) Date of Birth (in figures)								
	b) Date of Birth (in words)									
					Female :					
	Marital Status:									
ο.		esidential Address:								
ο.	(a) Phone :									
_) Any other contact no: Email:								
		ather's/ Husband's Name:								
		ther's/ Husband's Occupation:								
). —	Academic and Pr	cademic and Professional Qualification :								
	Qualification	Please specify the Course		School/College Board		/University Year of Passing	Main Subjects offered	% Marks obtained		
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	Graduation									
	Post						,			
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	Any Other									
10	Experience (If any	y, of Recognized Sc	hool only)							
	Name of School/Organisation		Designation		Total Experience		From	То		
					Total Experience		1 10111	10		
11.	Any other informa	ation in brief which	you would like to sha	are (Spe	cial Talent/A	chievement (if any))				
	Any other information in brief which you would like to share {Special Talent/Achievement (if any)}									
	I hereby affirm th	at the particulars gi	ven above are true t	o the be	st of my know	wledge and belief ar	nd I will be responsible for the	ne falsification		
	of the document/(s).									
	Note: Attach sep	arate sneet wherev	er details are requi	red.			`	ours faithfully		

(Signature of Applicant)

(Please enclose self attested copies of your Academic/Professional Qualifications. In case you are pursuing a course, enclose the Admit Card/ Enrolment Proof).