#### Annexure 'A'

### **APPLICATION FORM**



## AIR FORCE SCHOOL JODHPUR

(Old Pali Road Jodhpur, Raj. - 342011)

Affix recent passport size colour photograph or copy colour photo in soft copy (for sending by mail)

To, Executive Director Air Force School, Jodhpur (Rajasthan)

1.	Post Applied for	_						
1.		:						
	(Apply separately for each post)							
2.	Name in Block Letter	:						
3.	Father's / Husband's Name	:						
	(as written in matriculation certificate)							
4.	Mother's Name	:						
5.	Sex	:						
6.	Marital Status	:	(i) Married (ii) Single (iii) Single Parent					
7.	Correspondence Address	:						
	-							
8.	Phone No. (Residence with STD)	:						
9.	Mobile No.	:						
10.	Email ID (IN BLOCK LETTERS)	:						
11.	Date of Birth	:						Age: as on 01 Jul 25
12.	Nationality	:						
13.	Candidate's Mother Tongue	:						
14.	Language(s) you can Read	:						
	Speak	:						
	Write	:						

#### 15. Educational Qualification:

(Your candidature is subjected to verification of original documents before written exam/ first phase. Candidates are to bring original certificates with one set of photocopies. Candidates must ensure that their degrees/diplomas are genuine and approved by UGC/ NCTE, as applicable)

Examination Passed	Year of passing	Name of Board / University	% of marks obtained	Subjects

16. Appointments held before joining the Present Post/Previous Experience.

S	Name of Post	Name and address of Institution / Organisation	Duration.			
No			From	То	Years	

17.	Total Job experience in years :
18.	Any additional relevant information you will like to furnish regarding sports / co-curricular activities/ NCC/NSS/Scouts Guide, residential school experience etc.
19.	Other achievement, if any

Above mentioned information are true and I will be held responsible if found false.

Date:	
Place:	Signature of Applicant

# वायु सेना विद्यालय जोधपुर

## हेल्पर (स्वीपर) पद हेतु आवेदन पत्र

क. स.	विवरण	नवीन रंगीन फोटो स्व–हस्ताक्षरित
1.	अभ्यर्थी का पूरा नाम (हिन्दी व अंग्रेजी में)ः	
2.	जन्म तिथि : आयु 01.07.2025 को : वर्षः माहः (प्रमाण सहित)	दिवसः
3.	विवाहित, अविवाहित या अन्य :	
4.	मोबाइल नं. : मेल आई डी :	
5.	लिंग	
6	पिता / पति का नामः	
7	वर्तनाम पता	
8	अनुभव यदि हो तो	

उपरोक्त जानकारी सत्य है एवं किसी भी गलत सूचना के लिए मैं स्वयं जिम्मेदार रहूँगा/रहूँगी।

हस्ताक्षर