



INTERNATIONAL INDIAN SCHOOL, JUBAIL (IISJ)
P.O.BOX#1188, AL-JUBAIL-31961, KSA
Affiliated to CBSE Delhi, School No: 5730007,
Telephone: (03)-362 4130, Fax: (03)-361 1018

APPLICATION FORM
(To be filled in Capital Letters)

(Affix your Photograph)

1) Position Applied for: _____

2) Position:

First Aid Nurse

3) Personal Record:

Name: _____
First Middle Last

Date of Birth: ____/____/____ Age: _____ (Years) Nationality: _____

Passport Details: _____ / / _____ / / _____

Passport Number Issue Date (Eng.) Expiry Date (Eng.) Place of Issue

Iqama Details: _____ / / _____ / / _____

Iqama Number Issue Date(Eng.) Expiry Date(Eng.) Place of issue

Visa Status: Permanent Visit Ajeer

Current Address [KSA]:

Home Address [India]:

Telephone Details: _____
Residence Personal contact Email Id

Sponsor Details: _____
Iqama Number Expiry Date (Eng.) Company Name

4) Academic Record:

#	Qualification (Degree)	Mode of Study (Regular/Distance)	Institution/University	Year of Passing	Marks/Grade Obtained	Major Subjects

5) Special Skills & Talents: (e.g. Certification Courses sports and other socially useful productive work)

#	Brief Description

6) Work Experience Record: (Teaching and Other Work)

#	Post Held	Organization Details	Duration	Brief Job Responsibilities

7) Any other Relevant Information:

8) References:

#	Referee Name	Address	Telephone	Relation to you
1				
2				

9) Undertaking:

I certify that all the information furnished above for employment are true and correct to the best of my knowledge and belief, and I understand that any misrepresentation, falsification or omission of facts thereon may justify my disqualification of candidature.

Signature of the Applicant

____/____/____
Date

Note:

Please attach photocopies of all educational qualification, work experiences, extracurricular activities and documents supporting your publications, research, seminars, workshops and other information furnished in the application form.

Enclosures: (Photocopies only)

1	Certificate of Date of Birth	
2	Copies of Passport and Visa	
3	Academic & Professional Certificates	
4	Experience Certificates	
5	Certificates of Extra Curricular Activities	

FOR OFFICE USE ONLY

VERIFICATION REPORT

1	Visa Status	
2	Date of Birth	
3	Original: Post Graduation Certificate	
4	Original: Graduation Certificate	
5	Original: Under Graduation Certificate	
6	Training: Degree / Diploma / Certificate	
9	Mark List and Division	
10	Experience:	
11	Other Certificate if any:	

Date of Interview: _____

Verified by:

1) _____

2) _____

Date: ___/___/___

Date: ___/___/___