



# The Mar Thoma Church Educational Society

St. Thomas Nagar  
Mukkolakkal, Thiruvananthapuram-695044  
Phone: 0471-2511122, 2511211  
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Affix photo

## APPLICATION FOR FACULTY FOR ST. THOMAS INSTITUTE OF SCIENCE AND TECHNOLOGY Mar Chrysostom Nagar, Chanthavila, Kazhakuttam, Thiruvananthapuram

\* Please answer all questions clearly in BOLD letters.

Post Applied for

**Note:**

1. Self attested copies of Degrees/ Certificates/ Testimonials should be sent with the Application. Originals must be produced at the time of interview.
2. No TA will be paid to Applicants called for interview.
3. Application should be delivered personally at the Society office or send by Registered Post.
4. Further details may be seen in the website [www.stthomastvm.edu.in](http://www.stthomastvm.edu.in)

### PERSONAL DATA OF CANDIDATE

1. Name

2. Date of Birth

3. Sex. Female

Male

4. Marital Status: Married

Unmarried

Widow(er)

Separated

5. If Married, Name of Spouse

6. Educational Qualification / Occupation of Spouse

7. Contact Address & Tel. No. of Spouse

8. Religion

(a) Denomination

(b) If Marthomite, name of Parish

9. Address for communication

Pin Code

Residential Tele #

Mob#

Fax#

E-mail

10. Have you ever been convicted for any criminal offence? If so, give details.

11. Present Pay/last salary drawn. Scale  Basic Pay   
Allowances  Total

*(Candidate should be able to produce evidence of last pay drawn, if called upon to do so)*

## 12. ACADEMIC QUALIFICATIONS

### (i) UNIVERSITY / COLLEGE

Degree Passed	Subjects & Year	Division	% if applicable	University/College

### (iii) Any Other Qualification, if so give details:

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### 13. Teaching Experience *(Experience claimed without supporting Certificates is liable to be ignored)*

Designation	Period	Institution	Subject Taught	Reason for Leaving

14. Notice period required for joining

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15. Highlight briefly any notable contribution/achievements you had made in your career (including in the field of sports). Please furnish names of one or two persons who are aware of your achievements.(if necessary separate sheet may be attached)

**16. REFERENCES**

	Name & Address	Designation	Telephone Number
1)			
2)			

I hereby certify that the particulars furnished above are correct to the best of my knowledge and belief.

Date :

Place :

Signature of Applicant

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**For Office Use**

1. Date of Receipt
2. Date of Scrutiny & Result
3. Date when called for test/ interview