



# SHARJAH MAR THOMA SUNDAY SCHOOL

## TEACHERS APPLICATION FORM

Name of the Applicant:

(In Block letters)

first name

middle name

last name

More Details

Male

Age:

\_\_\_\_\_

Church ID:

\_\_\_\_\_

Female

Date of Birth:

\_\_\_\_\_

dd mm yy

Cell Phone

Residence Phone

Office Phone

Contact Information:

E-mail

P. O Box No:

\_\_\_\_\_

Emirate:

\_\_\_\_\_

Location:

\_\_\_\_\_

Area Prayer Group:

\_\_\_\_\_

Home Parish in India:

Address in India:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Number in India:

Academic Qualifications:

\_\_\_\_\_

Presently Working:

\_\_\_\_\_

Profession:

\_\_\_\_\_

Have you accepted Jesus Christ as your saviour? \_\_\_\_\_

Have you studied Sunday school? \_\_\_\_\_

Where? \_\_\_\_\_

\_\_\_\_\_

Upto which level? \_\_\_\_\_

\_\_\_\_\_

Do you have previous teaching experience in Sunday school/VBS? \_\_\_\_\_

If yes, Where? \_\_\_\_\_

\_\_\_\_\_

When: \_\_\_\_\_

\_\_\_\_\_

Special talents if any such as, teaching songs or any other which you feel constructive for the children:

\_\_\_\_\_

Which class do you prefer to teach?

Classes in between \_\_\_\_\_

&

\_\_\_\_\_

### Declaration

I, the undersigned declare that the particulars given above are true to my knowledge and belief. I solemnly swear in the name of our Lord that I will discharge my duties to the best of my knowledge and ability and follow the Rules and Regulations of Sharjah Mar Thoma Sunday school and the Malankara Mar Thoma Sunday school Samajam, if I am given a chance to serve.

Signature: \_\_\_\_\_

Date \_\_\_\_\_

### For Office Use Only

Date of Interview: \_\_\_\_\_

Appointed:

Yes

No

Which Class: \_\_\_\_\_

Div \_\_\_\_\_

Hold for a

period: \_\_\_\_\_

Remarks (if any): \_\_\_\_\_

President \_\_\_\_\_

Signature: \_\_\_\_\_

Headmaster \_\_\_\_\_

Signature: \_\_\_\_\_