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APPLICATION FORM FOR STEINER EDUCATION COURSE

Batch: Regular/ Saturday/ Advance

Year: _____

Name: Mr./Ms./Mrs. _____

Date of Birth _____ Place of Birth _____

Address: _____

Phone No: _____ Cell No: _____

Marital Status: Single Married Widow(er) Divorced

Children (if any) No: _____ Gender: _____ Date of Birth: _____

Email Id: _____

Languages Spoken: _____

Present Occupation: _____

Hobbies, Extra Curricular
Activities, Interests: _____

Educational
Qualification: _____

Experience: _____

Your Strengths _____

Your Weaknesses: _____

Spouse's Name: _____ PhoneNo: _____ Profession: _____

Hobbies, Extra Curricular
Activities, Interests _____

Why would you like to attend the Steiner Education Course Regular/Saturday/ Advance Batch (an Alternative System of Education) conducted by Indian Education Revival Trust?

The school requires teachers and volunteers. Which subject, if any, would you be interested in:

- Class Teacher
- Nursery K.G. Teachers Volunteers
- Handwork Craft Teachers Volunteers
- Music Teacher Volunteer
- Assistant Teachers
- Subject Teachers
- Excursions
- Special Blocks
- Any other area which you think
would be of interest / help to the school:

Date:

Signature: