



Pearl Special Needs Foundation

Application for Employment

Pearl Special Need Foundation is an Equal Opportunity Educational Institution and is committed to excellence through diversity. Employment offers are made on the basis of qualifications, and without regard to race, sex, religion, national or ethnic origin, disability, age, or sexual orientation.

PLEASE TYPE OR PRINT. Complete the entire application. You must still complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box. Applications with missing or invalid job numbers will not be considered for any position.

| | | | |
|--|--|--|--------------|
| Position Applying For: | Name (Last, First, Middle): | Other names under which you have attended school or been employed: | |
| Street Address: | | City, State & PinCode: | |
| Home Phone: | | Work Phone: | Other Phone: |
| Sex : | Age : | | |
| Are you currently employed at (company)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | If YES, what is your current job title & department? | |
| Have you ever been employed by (company)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | If YES, dates of employment & reason for leaving: | |
| Current Salary: | | Expected Salary: | |
| How did you learn about this employment opportunity at _____ ? Check all that apply: <input type="checkbox"/> Ad in <i>newspaper</i> | | | |
| <input type="checkbox"/> Job Bulletin (Posting) /Walk-in <input type="checkbox"/> Website <input type="checkbox"/> Ad in <i>magazine</i> | | | |
| <input type="checkbox"/> Referral by employee <input type="checkbox"/> Other: | | | |

EDUCATION

| Name of School | City/State | Did you graduate? | If No, # of years left to graduate | If Yes, date of Graduation | Degree received | Major |
|--|------------|--|------------------------------------|----------------------------|-----------------|-------|
| High School: | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Other School: | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| College: | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| College: | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| College: | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Other credentials/ licenses/ professional affiliations, etc., which are relevant to the job(s) for which you are applying. | | | | | | |

LANGUAGES

| Language | Read | Write | Speak |
|----------|------|-------|-------|
| | | | |
| | | | |
| | | | |

SKILLS: Please list technical skills, clerical skills, trade skills, etc., relevant to this position. Include relevant computer systems and software packages of which you have a working knowledge, and note your level of proficiency (basic, intermediate, expert)

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WORK EXPERIENCE-Please detail your entire work history. Begin with your current or most recent employer. If you held multiple positions with the same organization, detail each position separately. Attach additional sheets if necessary. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. Include full-time or volunteer commitments.

PLEASE NOTE: Pearl Special Need Foundation reserves the right to contact all current and former employers for reference information.

| | | |
|--|--|--|
| Dates Employed (most recent position) From: To | <input type="checkbox"/> Full time <input type="checkbox"/> Part-time If part-time, # hrs./wk: <input type="checkbox"/> | Title: |
| Starting Salary: | Organization Name and Address: | |
| Final Salary: | | |
| Supervisor's Name, Title and Phone #: | Other Reference Name, Title and Phone #: | Contact my current references: <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate |
| Primary duties: | | Reason for Leaving: |
| | | |
| Dates Employed (most recent position) From: To | <input type="checkbox"/> Full time <input type="checkbox"/> Part-time If part-time, # hrs./wk: <input type="checkbox"/> | Title: |
| Starting Salary: | Organization Name and Address: | |
| Final Salary: | | |
| Supervisor's Name, Title and Phone #: | Other Reference Name, Title and Phone #: | Contact my current references: <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate |
| Primary duties: | | Reason for Leaving: |
| | | |

Your Views on Teaching Children with Special Needs.[Answer in 200 words]

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize {Pearl Special Need Foundation} to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment.

I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off. I understand that the first SIX MONTHS of regular employment represent a provisional period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal.

Applicant Signature: _____

Date: _____

Please ensure you have completed the form in all the aspects. Please ensure you mail the application on below address or email it to pearl@psnf.org with Subject : Job Application. Please bring copy of this application at the time of interview if selected.

OUR ADDRESS

53 Sharadanagar Society,
Vikashgruh road.
Opp. Premvardhank Flats.
Nr Dharnidhar Temple,
Shreyas Bridge.
Paldi,
Ahmedabad
PIN 380 007

CONTACT PERSON

BIJAL FADIA
Mo:- 0091-9408507008
0091-7874866681
Email:- pearl@psnf.org