

A.G.B.U. SCHOOLS IN LEBANON

Central Office , Demirdjian Center, Antelias - Tel No 04-522842, 522843

TEACHER APPLICATION FORM

<p>ATTACH TO YOUR APPLICATION</p> <ul style="list-style-type: none"> ❖ RECENT PHOTOGRAPH ❖ PHOTO COPY OF I.D. CARD OR PASSPORT ❖ PHOTO COPY OF DIPLOMA (S) AND/OR CERTIFICATE(S) 	<p>POSITION APPLIED FOR</p> <p><input type="checkbox"/> FULL TIME <input type="checkbox"/> PART-TIME</p> <p>DATE AVAILABLE</p> <p>ANNUAL SALARY EXPECTED</p>
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PERSONAL DATA

Full Name (Block letters)					
Date & Place of birth :			Nationality Reg. Area Reg. No	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Home Address :		Bldg.	Street	City	
		Country	Area code	Tel No:	
Mailing Address :					
<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED		Full Name of Spouse		Occupation	
Number of children or other dependants					
Name	Sex	Date of birth	Single / Married	Working	Living at Home
Details of Health		General State of Health :			
		Social Security No :			
Remarks :					
Religion & Sect :					
Hobbies & Activities :					

Subjects you have taught	Classes	No. of years

List two references other than relatives or previous employers

Full Name	
Address and Telephone No	
Occupation	
Full Name	
Address and Telephone No	
Occupation	

Personal Statement

Please use this space for a personal statement , explaining why you are applying to our school , the essentials of your convictions concerning education , and any other points of relevance . If there are any reservations in your application , these should be stated .

I hereby declare that the information given above is true , complete and correct to the best of my knowledge. I , further, understand that any misrepresentation or material omission made is sufficient cause for cancellation of the application and for termination of my appointment , without notice , if employed .

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Date

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Signature of Applicant

FOR OFFICE USE ONLY :

Date of application received

First Interview Date Administration's Comments
..... Signature

Second Interview Date Administration's Comments
..... Signature

General Remarks / Decision

.....

Date

.....

Signature