

DIMAPUR AO BAPTIST AROGO

DIMAPUR – 797113: NAGALAND

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FULL TIME STAFF POST APPLICATION FORM

(Advertisement No. DABA/Estt-7/2024-25/9-SC4 dated 22.2.2025)

Affix recent
passport size
colour photo

1. Post Applied For*: _____
2. Name: _____
3. Father's Name: _____
4. Mother's Name: _____
5. Gender (Male/Female): _____
6. Marital Status (Single/Married): _____
7. Date of Birth: _____
8. Permanent Address: _____
9. Email ID: _____
10. Phone No.: _____

11. Academic Qualification:

| Sl. No. | Name of Exam | Board/University/Institute | Year of Passing | Class/Division | Remark |
|---------|--------------|----------------------------|-----------------|----------------|--------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

12. Experience:

| Sl. No. | Name of Church/Institution | Post Held | Period | | Nature of Duties |
|---------|----------------------------|-----------|--------|----|------------------|
| | | | From | To | |
| | | | | | |
| | | | | | |
| | | | | | |

*Candidates applying for multiple posts may mention accordingly.

13. References: Please provide names, addresses and occupations of two referees (not relatives), preferably a previous/current employer and a personal reference, whom we can approach regarding your application if so required.

| Referee 1 | | Referee 2 | |
|------------|--|------------|--|
| Name | | Name | |
| Address | | Address | |
| Email ID | | Email ID | |
| Phone No. | | Phone No. | |
| Occupation | | Occupation | |

DECLARATION BY THE APPLICANT

I do hereby solemnly declare that the entries made by me in this Form and the Documents submitted are true in all respects. If any information is found to be incorrect/suppressed, it will disqualify my candidature.

Date: _____

Signature of the Applicant

The following documents are to be submitted along with the duly filled Application Form:

1. Cover Letter.
2. Curriculum Vitae (CV)/Résumé.
3. Post specific eligibility document.
4. Testimony concerning 'Call to Serve'.
5. Character Certificate/Testimonial from one's Church and the Institution in which one is currently serving.
6. Physical Fitness Certificate from a registered medical Practitioner (Physician).
7. Academic Record and Certificate from Class 10 onwards.
8. Proof of Date of Birth document – Class 10 Admit Card.
9. Self-Testimonial concerning acceptance of teachings of the Holy Bible and the Baptist Church Distinctives.

FOR OFFICIAL USE ONLY

Date of Receipt: _____

Signature of the Convenor

Form No.: _____

Selection Committee