

APPLICATION FORM

Picture

1 x 1

Name of Post & BPS applied for _____

1. Name: _____
(WRITE IN CAPITAL LETTERS)

2. Father's Name _____

3. Date of Birth

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4. CNIC No.

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5. Domicile _____

6. District of Domicile _____

7. Postal Address (for communication):

8. Educational Qualification:-

Qualification	Passing Year	School / Board	Marks Obtained	Total Marks

9. Experience (if any):-

Organization / Department	Designation	Grade	Govt./Semi Govt./Private	Starting Date	Ending Date	Total years

10. Contact No: Office _____ Res. _____ Mobile _____

Declaration:

- i. I certify that the statement made by me in this application is true, complete and correct to the best of my knowledge and belief.
- ii. I have informed my Head Office / Department in writing that I am applying for this position (for candidates already in service).

Date: _____

Signature of Applicant: _____