

Application Form

Passport size 3
back attested
photos

Name _____

Post Applied For with BPS _____

F/Name _____

CNIC No _____

Domicile (District): _____

Age on Closing Date _____

Gender: Male/Female

Relevant Experience

Years _____

Months _____

Days _____

Qualification: _____

Degree / Certificate	Specialization	Marks obtained	Total marks	Division	Duration from to	Year of passing	Institute

Postal Address: _____

Permanent Address: _____

Contact No _____

Mobile# _____

Home # _____

E-mail Address: _____