

APPLICATION FORM

Application Reference No. (for office use only)	Eligible/Not Eligible
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1. Name _____ 2. Date of Birth _____
3. Father's Name _____ 4. e-mail _____
5. Postal Address _____
6. Permanent Address _____
7. Religion _____ 8. CNIC#

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9. Gender # _____ 10. Marital Status _____ 11. Domicile _____
12. Province _____ 13. Contact # _____
14. **ACADEMIC RECORD** (Give Exact name in Examination Column). Starting from High School (i.e. Matric) onwards in Chronological Order.

Examination (Matric/O Level FA / F.Sc/ A Level, BA/BSc, MA/MSc etc)	Passing Year	Board / University	Marks			Division / Grade/ CGPA	Major Subjects of Study
			Obtained	Total	% age		

15. **PROFESSIONAL EXPERIENCE:**

Exact Name of Post	Organization Name	Duration	Job Description

16. **TYPING/SHORTHAND SPEED WHERE APPLICABLE**

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17.

I certify that the information provided by me in this Form is true, complete and correct to the best of my knowledge and belief. I understand that any misrepresentation or material omission made on Application Form or other document(s) requested by the Department may result in cancellation of this and future application in department.

Date: _____

Signature: _____

- * Note:-**
- i) Partially filled forms will be rejected.
 - ii) Send application by post through P.O.Box No.1484, GPO, Islamabad