

National Accountability Bureau (NAB)

JOB APPLICATION FORM

Post Applied For _____

Choice of Station _____

1. Name of Applicant _____

2. Father's Name _____

3. CNIC No _____ Date of Birth _____

4. Address:-

a. Permanent _____

b. Present _____

5. Domicile _____

6. Contact No (Line/Mobile) _____

7. Details:

a. Academic Qualification

Sr. #	Degree / Certificates / Courses	Division / Grade / CGPA	Name of Board / University / Institute

b. Experience

Sr. #	Valid experience with designation, date and station	Department / Organization	Total period of experience till closing date of application	Remarks (if any)

Signature of Applicant _____

Date _____

Passport Size
Photograph