	A	ppli	cat	ion	Form	for R	ecru	iitme	ent		
Name of Post Applied for:						BPS:					
1. Name (write in c	apital lette	rs)									
2. Father's / Husba	nd's Name	(for fer	nale ma	rried ca	andidates)						
3. Date of Birth:											
4. CNIC No:				-				-			
5. Domicile: (Distri			(Province)								
6. Educational Qua	lification										
Qualification		Year		School / Board / University			ity	CGPA / DIV / Grade / % age of M			
7. Experience:											
Organization	Designation		Grade	Govt. / Semi Govt. / Private		Starting Date		Ending Date	Total Years		
8. Postal Address (f	for commu	nication):		20-205-0						
9. Contact No. Office;							Mobile:				
Declaration: I am also aware of							-		to the best of m	y knowledge.	
Date:						Siana	ature of	Applicant:			

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