## **Application Form**

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N	lame of Post		BPS _		Photo	
1. N						
2. F	ather's / Husband's Na	me (for fema	le married candidates)			
3. D	Pate of Birth		4. CNIC No			
5. D	Oomicile (District)		Province			
6. P	ostal Address					
7. P	ermanent Address					
8. C	Contact No. Office		Res	Mobile		
9. E	ducational Qualificatio	ns:-				
Qualification		Passing CGPA / Division / Grade/ Year % age of Marks		School / Board / University		
10.	Shorthand / Typing & (	Computer Li	teracy (Where applicable	)		
			nformation provided by non will to disqualification		t of my knowledge, I	
Date	e: Signature of Applicant:					