

APPLICATION FORM

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Name of District _____ Name of Post _____

Name of Applicant _____ S/o, D/o _____

CNIC No. _____ Date of Birth _____

Qualification (Academic) _____ Experience _____

Domicile _____ PRC _____

Contact & Mobile No. _____ Email _____

Personal Status (employed/Un-Employed) _____

Address _____

Signature of Candidate _____