APPLICATION FORM

Name of Post (Applied For) _____

PHOTO

Name: _____

Father's Name: _____

CNIC No. _____

Date of Birth _____

Gender   Male _____   Female _____

Religion _____

Domicile _____

Special Quota (if any):   Woman _____ Non-Muslim _____ Disabled _____

Educational Qualification _____

Relevant Experience (in years) _____

Professional Qualification (if any) _____

Address:

a. Postal Address _____

b. Permanent Address _____

c. Mobile Phone No. _____

Test Centre:

☐ Islamabad   ☐ Lahore   ☐ Karachi   ☐ Peshawar   ☐ Quetta

Date: _____   **Applicant's Signature** _____