Application Form

1	Post Applied For	2	BPS	
3	Name	4	Father's Name	
5	Date of Birth	6	Age	
7	CNIC Number	8	Mailing Address	
9	Mobile Number	10	E-mail	
11	Domicile (District & Province)	12	Disability	Yes / No
13	Nature of Disability			Ś.

a. Qualification (start with highest qualification)

Degree / Certificate	Passing Year	Marks Obtained Total Marks or CGPA	Division	Grade	Major Subject	Board / University
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			8	7		
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b. Computer Literacy / Other Course

Course / Certificate / Diploma	Duration	Passing / Qualifying Year	Institution	Board / University
	2			

c. Experience

Position	From / To	Total Period of Service	Name of Department
5			

Declaration: The information given above is correct to the best of my knowledge and belief.

Signature: _____

Date: _____