



Photograph

<b>Application for the post of:</b>						
<b>Through Proper Channel: (Yes/No)</b>		<b>NOC attached: (Yes/No)</b>				
<b>Name of Applicant</b>						
<b>Father's/Husband Name:</b>						
<b>Date of Birth (DD-MM-YYYY)</b>		<b>Age on closing date:</b>		<b>Gender: Male/Female</b>		
<b>Domicile Province:</b>			<b>District:</b>			
<b>Religion:</b>			<b>Nationality:</b>			
<b>CNIC No:</b>			<b>License LTV/HTV:</b>			
<b>Permanent Address:</b>						
<b>Postal Address:</b>						
<b>Phone # Office:</b>		<b>Home:</b>		<b>Cell #:</b>		

[illegible]

**Experience:**

Department/ Organization Name	Position Held	Period		Total Period of Service/Experience
		From	To	

Declaration: I certify that all information given above is correct to the best of my knowledge & belief in case of any concealment of information, I will be liable to be disqualified from the test/interview.

Dated: \_\_\_\_\_

Applicant's Signature