APPLICATION FORM

Name of Post(Applied for)_____

Name_____

Father's Name_____

CNIC No._____

Date of Birth_____

Gender   Male ☐   Female ☐

Religion_____

Domicile_____

Special Quota (if any)

☐ Women   ☐ Non-Muslim   ☐ Disable

Educational Qualification_____

Relevant Experience (in years)_____

Professional Qualification_____

Short hand/typing speed where applicable_____

Postal Address_____

_____

Permanent Address_____

_____

Cell No._____

Test Center_____

Islamabad   Lahore   Karachi   Peshawar   Quetta

Date_____   Applicant Signature_____