

FORM NO _____

APPLICATION FORM

(Please prepare your application as per following format)

Post Applied For _____ BPS _____

Name of Applicant _____

Father Name _____

CNIC No _____ Date of Birth _____

Domicile City _____ Domicile Province _____

Mobile No 1 _____ Mobile No 2 _____

Present Address: _____

Permanent Address: _____

Education/Qualification:

| Ser | Degree/Certificate | Division | Year | Board/university |
|-----|--------------------|----------|------|------------------|
| | | | | |
| | | | | |
| | | | | |

Other Certificate

| Ser | Degree/Certificate | Division | Year | Board/Institute |
|-----|--------------------|----------|------|-----------------|
| | | | | |
| | | | | |

Experience

| Ser | Designation | From | To | Organization/Department |
|-----|-------------|------|----|-------------------------|
| | | | | |
| | | | | |
| | | | | |

Signature _____

Date _____