

OFFICE OF THE DISTRICT & SESSIONS JUDGE HARIPUR

Phone #+92-995-920500, Fax # +92-995-920501 Website: districtcourtsharipur.net.pk Email: dsjharipur@gmail.com

APPLICATION FORM

Attach Passport Size picture

Application No											
1.	Doct applied for:										
2.	Post applied for: Open Merit/Quota (Specify):										
3.	Name :	mo:									
	Father's Name:										
4.	Date of Birth:										
5.	Domicile:										
6.	Computerized NIC Number:										
7.	Permanent address:										
8.	Postal Addr										
9.		ntact No <u>(Compulsory)</u> :									
10.	Details of A	cademic Qualification:-									
	Level of Education	Examination Passed	In which year the Exam Passed	Marks		Percentage					
				Obtained	Out of total	(% age)	Division	Grade			
	. Level										
H.S.S.C Level											
Graduation Level											
Master Level											
Other											
14.	Experience (if any):									
Date: Signature of Candidate											
RECEIPT											
A	Application No for the post of received through										
today on at											
Receiving Clerk Sig;											

CHARACTER CERTIFICATE

It	is	certified	that	Mr./Ms.						S/D/O
				_	is	is permanent			resident	
of_					,	District	Haripur,	who	is	personally
kno	own to	me. He/she	e bears g	good moral	chara	acter.				
Date	d:									
Sign	ature:				S	ignature:				
Name:					Name:					
Fath	er Nan	ne <u>:</u>			F	ather Name	<u>:</u>			
CNIC No:					C					
Mot	ile No	·			N	Iobile No. ₋				
Add	ress <u>:</u>				A	.ddress <u>:</u>				