	Government of Pakistan									Application No.					
FRR	Federal 1		ue												
PAKISTAN		<u>Appl</u>	<u>orm</u>								(For of	ice use o	only)		
Name of Department a		R(HQ)				Dl	R &S								
Note: Please fill the form in "block letters" and trick relevant box:															
Application for the po	st of														
In case of Regular Govt. emp Name of Department	ployee, please sp	ecify (Applicable	only to candidat	tes alrea	ady wor	king in Go	overnn	ent Org	anizations)						
Post Status Post Status										Photo					
Date of appointment		(Regular/ Contract)		Name of Post Held & BPS											
Dominilo	Tolomobo d	Dunish	Sindh	Sindh		KPK/Ex- FATA			Dalasi	.:	A IV			G.B	
Domicile	Islamabad	Punjab	(Urban)	(Rural)		KPK/EX- FATA			Balochistan		AJK		О.Б		
Quota	Women	Minority	Dis	abled					Please specify,		if any other				
Name of Applicant															
Father's Name															
-	-														
Date of Birth (as per N	Matric Certifi	atric Certificate/ CNIC)			-		Age		_				Sex		
N	-	<u> </u>			L			T1			N	1 ale	I	Female	
Nationality	Ren	igion		Com	puter	ized Nai	nonai	Ident	ity Card I	No.					
								-						-	
Email Address Phone No. (Landline) Mol											ile No.				
Mailing Address:															
Permanent Address:															
EDUCATION (Note: S	Starting from	High School (e.	.g. Matric) on	wards	in Ch	ronologi	cal O	rder), i	f required	additior	al row	may be	added		
		Name of Degree/ Certificate									Marks/CGPA obtained				
Year of Passing	Name o					Name of Board/University						Ol	tained	%	
DDOEECCIONAL EV	DEDIENCE														
PROFESSIONAL EX	PERIENCE										Dur	ation of	' Ioh		
Exact Name of Post	Organization/ Department Name				Job Description						om To				
											-				
•							Total	exper	ience:						
Shorthand/ Typing spee	d for the post	of Stenotypist/	LDC	_/		wor	ds pe	minu	e.						
Key per hour depression	ns (KPHD) for	r the post of Da	nta Entry Ope	rator (DEO)				key per ho	our.					
Note: All column mus	t be filled		<u>CE</u>	RTIF	TICA	TE									
I hereby certify that info	ormation give	n in this form is	absolutely tr	ue. Ar	ny info	rmation	found	false	will be trea	ated as b	reach o	of trust	and I sh	all be	
liable for cancellation of	f my applicati		•		•										
columns that I have fille	ed up.														

Signature of Candidate:

Date: