**University of Peshawar**

Affix your passport size photograph here



**APPLICATION FORM**

**FOR**

**GIS Associates in Excise, Taxation and Narcotics Control Department, Government of Khyber Pakhtunkhwa**

**N.B:**

 **Please type or print clearly and attach attested copies of the requisite testimonials herewith.**

 **1. Name:**

 **(in capital letters)**

 **2. Father’s Name:**

 **(in capital letters)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  | - |  |  |  |  |  |  |  | - |  |

 **3. Gender: (Please Tick) Male Female 4. N.I.C. No.**

 **5. Mailing Address:**

(for correspondence)

 **6. Permanent Address:**

 **7. Mobile / Cell No. 8. E-Mail:**

**Year Months Days**

**(Age on closing date)**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | **-** |  |  | **-** |  |  |  |  |

 **9. Date of Birth 10.**

 **11. Nationality: 12. Domicile**

 **13. Marital Status 14. Religion**

 **15. ACADEMIC QUALIFICATION:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **S#** | **Examination** | **Board/****University** | **Year of Passing** | **Attempt** | **Total Marks** | **Obtained Marks** | **Division/ Grade** | **Distinction, if any** |
|  |  |  |  |  |  |  |  |  |

 **16. Professional Qualification/Training/Certification/Others, if any;**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S.No.** | **Name of Institution** | **Type of training / course** | **Duration** | **Diploma or Certificate obtained** |
| **From** | **To** |
|  |  |  |  |  |  |

 **17. Employment Record:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **S#** | **Name of Institution/****Organization** | **Duration** | **Designation** | **BPS** | **Nature of Job Permanent/ Temporary** | **Job Description** |
| **From** | **To** |
|  |  |  |  |  |  |  |  |

 **18. Bank Draft / Receipt No. *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* (Please attach in original)**

 **Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **List of testimonials attached:**

 **It is hereby certified that information given in this application form is correct and nothing relevant has been concealed.**

 **Date: \_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Signature of Applicant**