**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**