Photo



## BACHA KHAN UNIVERSITY, CHARSADDA

## APPLICATION FORM

Positi	on applied for:							
Name: F/Name:								
Domicile/District:Contact No:								
CNIC No: Physical Disability (if any)								
Distinctions if any: (Gold Medal, Silver Medal Etc								
Mailing Address:								
Permanent Address:								
References (other than relatives)								
Name Position Mobile No					e No			
S.No	Degree/Certificate	Marks Obtain	Total Marks	Percentage	Passing Year		nstitution/University	
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3		7.				1		
4	A							
5								
6					bole (			
Documents must be attached  CURRENT EMPLOYMENT RECORD (If Any)								
S#	Name of Institute / Organi		Designation	BPS/Scale	W.e.f	Upto	Nature of Job  (Permanent /  Temporary/ Contract/  Fixed Pay, etc)	
1								
Total Experience:  Years: Months: Days:								

## OTHERS EXPERIENCE DETAILS

Experience Certificates must be attached duly attested by the gazetted officer.  Those already in Government services should apply through proper channel, or attached Departmental NO and Experience Certificate duly issued by the Competent Authority.  INSTRUCTIONS  (a) Please fill each row and column in this proforma very carefully and no column should be left blank.  (b) "Not Applicable" or "NA" should be mentioned where necessary (in case the information is available/relevant).  (c) Wherever necessary, use additional sheets for additional information.  (d) All entries in this form should be typed or written clearly.  (e) Attested photocopies of all documents must be attached  (f) Incomplete proforma will not be entertained.  DECLARATION  I hereby declare that all the entries in this proforma and all the additional particulars (if any) furnisalong with it are true to the best of my knowledge and belief. I understand and accept that misrepresentation or concealment of the facts will entail rejection of my application or dismissal f service, at any time, when applicable.  Dated:  Signature of applicant							
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