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FOR  
Public Sector Organization, Govt of  
Sindh (PSO-GoS) (425)

CANDIDATE's PERSONAL DATA امیدوار کی ذاتی معلومات (Application Form with incomplete personal data or information will not be entertained)												
1. FULL NAME پورا نام Write all in CAPITAL												A
												B
2. FATHER's NAME والد کا نام Write all in CAPITAL												X
												Y
3. GENDER جنس	MALE	<input type="checkbox"/>	FEMALE	<input type="checkbox"/>	4. DATE OF BIRTH پیدائش کی تاریخ			d	d	.	m	m
								.			y	y

5. CNIC NUMBER قومی شناختی کارڈ نمبر						-						-
6. CNIC NUMBER Re-enter						-						-
7. MOBILE NUMBER موبائل فون نمبر	(+92)	0	3			-						8.

9. E-MAIL ADDRESS	@												
10. PERMANENT ADDRESS Write all in CAPITAL مستقل پتہ													
11. DOMICILE PROVINCE رہائش گاہ کا صوبہ	Province						12. DOMICILE DISTRICT رہائش گاہ کا ضلع	District					

13. RELIGION مذہب	MUSLIM مسلم	<input type="checkbox"/>	NON MUSLIM غیر مسلم	<input type="checkbox"/>	14. DISABILITY معذوری	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
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15. CURRENT OCCUPATION موجودہ پیشہ	GOVERNMENT SERVANT	<input type="checkbox"/>	PRIVATE SERVICE	<input type="checkbox"/>	IF JOBLESS	<input type="checkbox"/>	IF EX-SERVICEMAN	<input type="checkbox"/>
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A. POST SELECTION (Please mark only one post)	
05. Naib Qasid <input type="checkbox"/>	06. Sweeper <input type="checkbox"/>

Please do not damage this form by folding it and complete it with CAPITAL letters

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براه کرم اس فارم کو فولڈ کر کے ڈیمج نہ کریں، اور بڑے لیٹرز کے ساتھ مکمل کریں

FOR

## 2,3 Public Sector Organization, Govt of Sindh (PSO-GoS) (425)



### D. DESIRED TEST CENTER

(PTS will decide your final test center)(Please mark only one box (برائے مہربانی صرف ایک باکس منتخب کریں))

East Karachi	<input type="checkbox"/>	West Karachi	<input type="checkbox"/>	Sukkur	<input type="checkbox"/>	Hyderabad	<input type="checkbox"/>	
Mirpur Khas	<input type="checkbox"/>	Larkana	<input type="checkbox"/>	Nawabshah Or Shaheed Benazirabad*				<input type="checkbox"/>

\*\*Subject to number of candidates

### F. ACADEMIC / QUALIFICATION SELECTION DATA

(Please complete it properly (براه کرم مکمل طور پر اور مناسب طریقے سے بھریں))

Certificate /Degree Level	Degree or Certificate Title	Year Passing	Obtained Marks / CGPA	Total Marks / CGPA	%age	Division	Institute/Board/University
Literate or Primary							
Middle (08 Years)							
SSC / Matric O-Level (10 Years)							
HSSC / DAE / A-Level (12 Years +)							
Bachelors (14 Years)							
Bachelors/BS (16 years)							

### H. JOB / PROFESSIONAL EXPERIENCE DATA

(Please complete it properly (براه کرم مکمل طور پر اور مناسب طریقے سے بھریں))

S.No#	Organization / Employer Name	Position (Working as)	Job Duration Write only Month & Year		Total Period Of Experience
			From	To	
1					
2					
3					

If more (experience or qualification) to mentioned, kindly attached another page 3A, next to page 3 & sign.

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## GENERAL INSTRUCTIONS

## GENERAL INSTRUCTIONS FOR APPLICATION FORM TESTING

Please fill this form as per instructions give below:

- Application form is free of charge and it's not for sale.
- Application form received after due date will not be considered.
- Application form which is incomplete or submitted by hand will not be entertained.
- Applicant age shall be calculated from the closing date of application.
- Candidates must attach clear photocopy of their CNIC (NADRA).
- Applications carrying incorrect information shall be instantly rejected.
- Candidature could be determined on the basis of applicants' personal data, domicile, qualification, professional experience and performance in test/s to be conducted by P.T.S.
- No TA / DA would be admissible for test/interview. However, test & interview is devised by the employer within their legal criteria & policy. Hence, only shortlisted candidates will be intimated for test, exam or interview.
- Please make sure that if any other person attempts to take the test, exam or interview in your place, both you and such person will be liable to prosecution. And details relating to the situation will be forwarded to the relevant employer and appropriate regulatory authorities.
- In case of any bogus/ false information or criminal record, selection shall stand withdrawn/cancelled immediately.
- Disabled persons, females, orphans, minorities or non-Muslims are encouraged to apply.
- Employer has right to alter/cancel the test, post, position and distribution of advertised vacancies.
- Deposited Test Fee is non-refundable / nor-transferable.

## CHECK LIST

- I have signed & thumb my application form.
- I have provided all the information required.
- I have attached the copy of my NADRA CNIC.
- I have paid & attached the fee challan form.

## UNDERTAKING BY THE CANDIDATE

By signing below and submitting this Form, I \_\_\_\_\_ s/d/w of \_\_\_\_\_ do hereby declares that I have read General Instructions and the information I am providing in this form is accurate & true to my knowledge. In case of any information comprise herein found at any stage to be conceal, missing, untrue, false or forged, my candidature can be cancelled at any stage (even after employment, if so revealed later), and I shall be liable to any legal action against me. And I am using P.T.S. as Service Provider only so P.T.S. will not stand liable for what I have signed in this form & result I obtain in after selection or test.

PASTE  
PHOTO  
تصویر پیسٹ کریں

Date & Left Thumb Impression







Candidate's Signature

HELP LINE  
051 111 111 787  
www.pts.org.pk

BY POST MAIL

To,

PAKISTAN TESTING SERVICE  
PTS Head Quarter, 3rd Floor, Adeel Plaza,  
Fazal-e-Haq Road, Blue Area, ISLAMABAD.

<b>5</b>	If payment made through following transaction, mark checker box and attach proof of payment.	Online <input type="checkbox"/> Mobile Paise <input type="checkbox"/> Bank <input type="checkbox"/>	Project Code <b>(425)</b>												
 <b>Bank Deposit Slip (PTS Copy)</b> Public Sector Organization, Govt of Sindh (PSO-GoS) (425)		Branch Name: Branch Code: Payment Date:													
<b>Habib Bank Limited</b>  A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA <b>HBL A/C Number: 0042-79916572-03</b>		<b>United Bank Limited</b>  A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA <b>UBL A/C Number: 225701041</b>													
Please note: 1. Desired Bank Stamp is required on the Deposit Slip or attach electronic receipt with deposit Slip. 2. Send Original Deposit Slip (PTS Copy) & application to PTS Office within due date.															
Applicant Full Name		Bank Charges Or/If/Any Other Applicable Charges	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; text-align: center;">50-</td> <td style="width: 15%;">Amount in words PKR</td> <td style="width: 60%;">Fifty Rupees Only</td> </tr> <tr> <td style="text-align: center;">300-</td> <td>Amount in words PKR</td> <td>Three hundred Rupees Only</td> </tr> <tr> <td colspan="2" style="text-align: center;">Deposited Amount</td> <td style="text-align: center;">PKR 350-</td> </tr> <tr> <td style="text-align: center;">350-</td> <td>Amount in words PKR</td> <td>Three hundred &amp; Fifty Rupees Only</td> </tr> </table>	50-	Amount in words PKR	Fifty Rupees Only	300-	Amount in words PKR	Three hundred Rupees Only	Deposited Amount		PKR 350-	350-	Amount in words PKR	Three hundred & Fifty Rupees Only
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Father's Name		Test Fee													
Mobile Number		Deposited Amount	PKR 350-												
CNIC Number (FRC, CRC or PV#)		Total Fee													
Post/Position Applied (Only for One Position)	05. Naib Qasid OR 06. Sweeper	Applicant's Signature	Cashier's Stamp												
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