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FOR
Provincial Assembly of Sindh (PAS) (544)

| 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 | C |
| | | | | | | | | | | | | | | | |
| 2. FATHER's NAME والد کا نام Write all in CAPITAL | | | | | | | | | | | | | X | Y | Z |
| | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | |
|------------------|-------------------------------|---------------------------------|-------------------------------------|---|---|---|---|---|---|---|---|---|---|
| 3. GENDER جنس | MALE <input type="checkbox"/> | FEMALE <input type="checkbox"/> | 4. DATE OF BIRTH پیدائش کی تاریخ | d | d | . | m | m | . | y | y | y | y |
|------------------|-------------------------------|---------------------------------|-------------------------------------|---|---|---|---|---|---|---|---|---|---|

| | | | | | | | | | | | | | | |
|---|--|--|--|--|--|---|--|--|--|--|--|--|---|--|
| 5. CNIC NUMBER قومی شناختی کارڈ نمبر | | | | | | - | | | | | | | - | |
| 6. CNIC NUMBER Re-enter | | | | | | - | | | | | | | - | |

| | | | | | | | | | | | | | | |
|--|-------|---|---|--|--|---|--|--|--|--|--|--|--|--------------------|
| 7. MOBILE NUMBER 1 موبائل فون کا نمبر | (+92) | 0 | 3 | | | - | | | | | | | | Primary |
| 8. MOBILE NUMBER 2 موبائل فون کا نمبر | (+92) | 0 | 3 | | | - | | | | | | | | Secondary (If any) |

| | | | | | | | | | | | | | | |
|---|---|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 9. E-MAIL ADDRESS | @ | | | | | | | | | | | | | |
| 10. PRESENT ADDRESS Write all in CAPITAL موجودہ پتہ | | | | | | | | | | | | | | |

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|--|----------|--|--|--|--|---|----------|--|--|--|--|--|--|--|
| 11. DOMICILE PROVINCE رہائش گاہ کا صوبہ | Province | | | | | 12. DOMICILE DISTRICT رہائش گاہ کا ضلع | District | | | | | | | |
|--|----------|--|--|--|--|---|----------|--|--|--|--|--|--|--|

| | | | | | |
|-------------------|---------------------------------|-------------------------------------|-----------------------|------------------------------|-----------------------------|
| 13. RELIGION مذہب | MUSLIM <input type="checkbox"/> | NON MUSLIM <input type="checkbox"/> | 14. DISABILITY معذوری | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
|-------------------|---------------------------------|-------------------------------------|-----------------------|------------------------------|-----------------------------|

| | | | | |
|---------------------------------------|---|--|-------------------------------------|---|
| 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"/> |
|---------------------------------------|---|--|-------------------------------------|---|

| | | | | |
|--------------------------------|--|--|--|--|
| A. POST APPLIED (درخواست پوسٹ) | | | | |
|--------------------------------|--|--|--|--|

| | | | | |
|-----------------------|--|--|--|--------------------------|
| 04. Reporter (BPS-18) | | | | <input type="checkbox"/> |
|-----------------------|--|--|--|--------------------------|

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

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(PAS) (544)

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FOR
Provincial Assembly of Sindh (PAS) (544)

| 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"/> | |

Final Test Centers are Subject to number of candidates

| F. ACADEMIC / QUALIFICATION SELECTION DATA | | | | | | | |
|---|-----------------------------|--------------|-----------------------|--------------------|------|----------|----------------------------|
| (Please complete it properly براہ کرم مکمل طور پر اور مناسب طریقے سے پھریں) | | | | | | | |
| Certificate /Degree Level | Degree or Certificate Title | Year Passing | Obtained Marks / CGPA | Total Marks / CGPA | %age | Division | Institute/Board/University |
| SSC / Matric O-Level (10 Years) | | | | | | | |
| HSSC / DAE / A-Level (12 Years +) | | | | | | | |
| Bachelors (14 Years) | | | | | | | |
| Bachelors/BS (16 years) | | | | | | | |
| Masters (16+ years) | | | | | | | |
| M-Phil/MS | | | | | | | |
| Ph.D. | | | | | | | |

| G. OTHER CERTIFICATION / DIPLOMA / COURSE / COMPUTER / OTHER SKILLS DATA | | | | | |
|---|------------------|--------------------------------------|----------|----|----------------|
| (Please complete it properly براہ کرم مکمل طور پر اور مناسب طریقے سے پھریں) | | | | | |
| Certificate /Diploma Level | Institution Name | Name of Diploma/Course & Certificate | Duration | | Total Duration |
| | | | From | To | |
| Certificate | | | | | |
| Diploma | | | | | |
| Course | | | | | |
| Computer Or Other Skills | | | | | |

| H. JOB / PROFESSIONAL EXPERIENCE DATA | | | | | |
|---|------------------------------|-----------------------|---|----|----------------------------|
| (Please complete it properly براہ کرم مکمل طور پر اور مناسب طریقے سے پھریں) | | | | | |
| S.No# | Organization / Employer Name | Position (Working as) | Job Duration Write only Month & Year | | Total Period Of Experience |
| | | | From | To | |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |

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PAKISTAN TESTING SERVICE



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).
- Computer literacy is a must for all position except support staff.
- Applications carrying incorrect information shall be instantly rejected.
- Candidate should bring their original testimonials at the time of interview.
- Original signed letter from your employer stating name, position, salary, duration of employment, address and contact numbers of employer if already in job or jobless.
- Candidates should also attach photocopies of all supporting documents if required or mentioned in the advertisement {e.g. (SSC/Intermediate certificates recognized by board),(Degrees recognized by HEC), Domicile, Local Certificate or NOC etc.} in A4-sized (8.27" x 11.69")
- 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.



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If payment made through following transaction, mark checker box and attach proof of payment.

Online ☐Mobile Paisa ☐Bank ☐Project Code
(544)**Bank Deposit Slip (PTS Copy)****Provincial Assembly of Sindh
(PAS) (544)**

Branch Name:

Branch Code:

Payment Date:

Habib Bank Limited

A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA

HBL A/C Number: 0042-79916572-03**United Bank Limited**

A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA

UBL A/C Number: 225701041

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 | 30- | Amount in words PKR | Thirty Rupees Only |
| Father's Name | | Test Fee | 999- | Amount in words PKR | Nine hundred & ninety nine Rupees Only |
| Mobile Number | | Deposited Amount | PKR 1029- | | |
| CNIC Number (FRC, CRC or PV#) | | Total Fee | 1029- | Amount in words PKR | One thousand & twenty nine Rupees only |
| Post/Position Applied (Only for One Position) | 04. Reporter (BPS-18) | Applicant's Signature | | Cashier's Stamp | |

**Bank Deposit Slip (Bank Copy)****Provincial Assembly of Sindh
(PAS) (544)**

Branch Name:

Branch Code:

Payment Date:

Habib Bank Limited

A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA

HBL A/C Number: 0042-79916572-03**United Bank Limited**

A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA

UBL A/C Number: 225701041

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 | 30- | Amount in words PKR | Thirty Rupees Only |
| Father's Name | | Test Fee | 999- | Amount in words PKR | Nine hundred & ninety nine Rupees Only |
| Mobile Number | | Deposited Amount | PKR 1029- | | |
| CNIC Number (FRC, CRC or PV#) | | Total Fee | 1029- | Amount in words PKR | One thousand & twenty nine Rupees only |
| Post/Position Applied (Only for One Position) | 04. Reporter (BPS-18) | Applicant's Signature | | Cashier's Stamp | |

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If payment made through following transaction, mark checker box and attach proof of payment.

Online ☐Mobile Paisa ☐Bank ☐**E=****(PAS) (544)**