

APPLICATION FORM

درخواست فارم

PASTE

FOR Provincial Assembly of Sindh (PAS) (544)

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|---|--------|-----|-------------|--------|---------|-----------------------|----------|-----------|------------------------------------|-----------|-----------|----------|------------|------|----|-----------------------|
| امیدوار کی ذاتی معلومات CANDIDATE's PERSONAL DATA | | | | | | | | | | | | | | | | |
| | | (| (Appli | cation | Form wi | th incom | plete pe | ersonal d | data or ir | formation | on will n | ot be en | tertained | i) | | |
| 1. FULL NAME | | | | | | | | | | | | | | A | В | C |
| پورا نام Write all in CAPITAL | | | | | | | | | | | | | | | | |
| 2. FATHER's NAME | | | | | | | | | | | | | | Х | Y | N |
| والد كا نام Write all in CAPITAL | | | | | | | | | | | | | | | | |
| | | • | | | | | | | | | | | | | | |
| 3. GENDER جنس | MALE | | FEMAL | _E | | OF BIRTH پیدانش کو | d | d | - | m | m | - | У | У | У | У |
| | | | | | | | | | | | | | | | | |
| 5. CNIC NUMBER قومی شناختی کارڈ نمبر | | | | | | | - | | | | | | | | - | |
| 6. CNIC NUMBER Re-enter | | | | | | | - | | | | | | | | - | |
| | | | | | | | | | | | | | | | | |
| 7. MOBILE NUMBER 1 مويانل فون كاتمبر | (- | +92 |) | 0 | 3 | | | - | | | | | | | | Primary |
| 8. MOBILE NUMBER 2 مويانل فون كانمبر | (- | +92 |) | 0 | 3 | | | - | | | | | | | | Secondary (If any) |
| | | | | | | | | | | | | | | | | |
| 9. E-MAIL ADDRESS | | | | | | | | | 0 | | | | | | | |
| 10. PRESENT ADDRESS | | | | | | | | | | | | | | | | |
| Write all in CAPITAL موجوده پتہ | | | | | | | | | | | | | | | | |
| | | - | | | | | | | | | | | | | | |
| 11. DOMICILE PROVINCE ربانش گاه کا صوبہ | | | | Pr | ovir | nce | | | 12. DOMIC DISTRIC گاه کا ضلع | CT | | | Dist | rict | | |
| | | | | | | | | | | | | | | | | |
| 13. RELIGI | دېب ON | 9 | JSLIM سه | | | NON MU بر مسلم | | | 14. D | ISABLITY | معذوری | | YES | | NO | |
| | | | | | | | | | | | 1 | | | | | |
| 15. CURRENT OCCUPATION GOVERNMENT SERVANT PRIVATE SERVICE IF JOBLESS IF EX-SERVICEMAN | | | | | | | | | | | | | | | | |
| A. POST APPLIED (درخواست پوسٹ) | | | | | | | | | | | | | | | | |
| | | | | | | | | | | - | | | | | | |
| | | | | 11 | . Ed | litor | of | Del | bate | es (l | BPS | S-17 | ') | | | |

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)



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|---|---|------|---------------|-----------------------|--------------------------|--|-----------------------|--|--------------------|--------|----------|-----------------|-----------------|---------|---------|---------|--------|----|
| D. DESIRED TEST CENTER (PTS will decide your final test center)(Please mark only one box کریں) | | | | | | | | | | | | | | | | | | |
| East Karachi | | | West Kar | | | | | | Suk | | | | | | | rabad | | |
| Mirpur Khas | | ıs | | Lark | kana | | | Ī | Nawabshah Or Shahe | | | | eed Benazirabad | | | | | |
| | | | | | | Final Test Centers are Subject to number of candidat | | | | | | | | didates | | | | |
| | F. ACADEMIC / QUALIFICATION SELECTION DATA (براہ کرم مکمل طور پر اور مناسب طریقے سے بهرین Please complete it properly) | | | | | | | | | | | | | | | | | |
| Certificate //Degree Level Degree or Certificate | | | ificate Title | Year | Obtained Marks / CGPA | | Total Marks / CGPA | | %age Division | | Division | Institute/Board | | rd/Uni | versity | | | |
| SSC / Matr O-Level (10 Years | | | | | | | | | | | | | | | | | | |
| HSSC / DAI A-Level (12 Years - | | | | | | | | | | | | | | | | | | |
| Bachelors (14 Years) | | | | | | | | | | | | | | | | | | |
| Bachelors/6 (16 years) | | | | | | | | | | | | | | | | | | |
| Masters (16+ years | | | | | | | | | | | | | | | | | | |
| M-Phil/MS | s | | | | | | | | | | | | | | | | | |
| Ph.D. | | | | | | | | | | | | | | | | | | |
| | G. | ОТНЕ | ER CEI | RTIFICATIO | | | | | | | | | | SKILL | S DA | ATA | | |
| Certificate | | | | | | me of D | | | | | | ation | | | | | | |
| /Diploma Level | 1 | Ins | stitutior | n Name | | | ertific | | | | From | | Т | О | | Γotal D | uratio | on |
| Certificat | te | | | | | | | | | | | | | | | | | |
| Diploma | 1 | | | | | | | | | | | | | | | | | |
| Course | | | | | | | | | | | | | | | | | | |
| Computer Other Skil | | | | | | | | | | | | | | | | | | |
| H. JOB / PROFESSIONAL EXPERIENCE DATA (Please complete it properly) براه کرم مکمل طور پر اور مناسب طریقے سے بهریں | | | | | | | | | | | | | | | | | | |
| S.No# Organization / Employer Name | | | | Position (Working as) | | | | Job Duration Write only Month & Year From To | | | | Total Exp | Perio erien | | | | | |
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(PAS) (544)

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PAKISTAN TESTING SERVICE



GENERAL INSTRUCTIONS

| GENERAL INSTRUCTIONS FOR APPLICATION FORM TESTING | CHECK LIST | | | | | |
|---|--|--|----------------------------------|--|--|--|
| Please fill this form as per instructions give below: | | I have signed & thumb r | my application form. | | | |
| Application form is free of charge and it's not for sale. Application form received after due date will not be considered. | | I have provided all the in | nformation required. | | | |
| Application form which is incomplete or submitted by hand will not be ente Applicant age shall be calculated from the closing date of application. Candidates must attach clear photocopy of their CNIC (NADRA). | rtained. | I have attached the copy | of my NADRA CNIC. | | | |
| Computer literacy is a must for all position except support staff. Applications carrying incorrect information shall be instantly rejected. | | I have paid & attached t | he fee challan form. | | | |
| Candidate should bring their original testimonials at the time of interview. Original signed letter from your employer stating name, position, salary, dialready in job or jobless. | | | s of employer if | | | |
| Candidates should also attach photocopies of all supporting documents if (SSC/Intermediate certificates recognized by board),(Degrees recognized in A4-sized (8.27" x 11.69") | | | | | | |
| Candidature could be determined on the basis of applicants' personal datin test/s to be conducted by P.T.S. No TA / DA would be admissible for test/interview. However, test & interview. | | • | • | | | |
| Hence, only shortlisted candidates will be intimated for test, exam or intended. Please make sure that if any other person attempts to take the test, exam prosecution. And details relating to the situation will be forwarded to the refunction of the increase of any bogus/ false information or criminal record, selection shall sometimes. Disabled persons, females, orphans, minorities or non-Muslims are encounted. Employer has right to alter/cancel the test, post, position and distribution of Deposited Test Fee is non-refundable / nor-transferable. | or interview in your place, bo elevant employer and appropr stand withdrawn/cancelled im graged to apply. | iate regulatory authoritie | | | | |
| | | | | | | |
| UNDERTAKING E | BY THE CANDIDATE | | | | | |
| By signing below and submitting this Form, I | | s/d/w of | | | | |
| Instructions and the information I am providing in this form is a of any information comprise herein found at any stage to be or my candidature can be cancelled at any stage (even after empt be liable to any legal action against me. And I am using P.T.S not stand liable for what I have signed in this form & result I of | onceal, missing, untrue, bloyment, if so revealed . as Service Provider on | owledge. In case false or forged, later), and I shall ly so P.T.S. will | PASTE PHOTO نصویرپیسٹ کریں | | | |
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| Date & Left Thumb Impression | Cand | lidate's Signa | ature | | | |
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| HELP LINE | To, | | | | | |
| | · | ECTING OF | DVICE | | | |
| 051 111 111 787 💢 | PAKISTAN T | | | | | |
| www.nte.org.nk | PTS Head Quarte | r, 3rd Floor, Ac | leel Plaza. | | | |
| www.pts.org.pk Fazal-e-Haq Road, Blue Area, ISLAMABAD. | | | | | | |

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(PAS) (544)

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|--|--|--|-------------------|----------------------------|---|--|--|--|
| 5 | If payment made through following transaction Mobile Mobile | on, mark checker box and a | attach pro Bai | · · | t. Project Code (544) | | | |
| | Bank Deposit Slip (PTS Copy) | Branch Name: | | | , , | | | |
| PTS Pr | ovincial Assembly of Sindh (PAS) (544) | Branch Code: Payment Date: | | | | | | |
| | abib Bank Limited kistan Testing Service (Pvt) Ltd-MCA | Unito A/C Title: Pakist | | nk Limite ng Service (F | | | | |
| HBL A/C N | umber: 0042-79916572-03 | UBL A/C | Numb | er: 225 | 701041 | | | |
| Please note: 1. Desired B | ank Stamp is required on the Deposit Slip or attach electronic receipt | with deposit Slip. 2. Send Original Dep | oosit Slip (PTS | Copy) & application | on to PTS Office within due date. | | | |
| Applicant Full Name | | Bank Charges Or/lf/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 | | PKI | R 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) | 11. Editor of Debates (BPS-17) | Applicant's Sign | aturo | | Cashier's Stamp | | | |
| | | Applicant 3 digitator | | | | | | |
| | Bank Deposit Slip (Bank Copy) | Branch Name: | | | | | | |
| PTS Pr | ovincial Assembly of Sindh (PAS) (544) | Branch Code: Payment Date: | | | | | | |
| | abib Bank Limited kistan Testing Service (Pvt) Ltd-MCA | United Bank Limited A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA | | | | | | |
| | umber: 0042-79916572-03 | UBL A/C | | | | | | |
| Please note: 1. Desired B | ank Stamp is required on the Deposit Slip or attach electronic receipt | | oosit Slip (PTS | | | | | |
| Applicant Full Name | | Bank Charges Or/lf/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 | | PKI | R 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) | 11. Editor of Debates (BPS-17) | Applicant's Sign | ature | | Cashier's Stamp | | | |
| 5 | If payment made through following transaction Mobi | | | | t. | | | |
| | | | | | | | | |