APPLICATION FORM درخواست فارم



E=

(PAS) (544)

ئگ سروس 1	كستان تيستن		Prov	incia	al As	sem	FO bly	R of Siı	ndh	(PA	S) (5	544)		PASTE PHOTO ریر پیسٹ ک)
		(Apr						DATA data or in					d)		
1. FULL NAME پورا نام Write all in CAPITAL													A	В	С
2. FATHER's NAME والد کا نام													Х	Y	Z
Write all in CAPITAL															
3. GENDER جنس	MALE	FEN	IALE		OF BIRTH پیدانش کی	d	d	-	m	m		У	У	У	У
5. CNIC NUMBER فومی 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 كاتمبر	(+	92)	0	3			-								Secondary (If any)
9. E-MAIL ADDRESS								0							
10. PRESENT ADDRESS Write all in CAPITAL موجودہ پنہ															
11. DOMICILE PROVINCE ربانش گاه کا صویہ			Pr	ovir	nce			12. DOMIC DISTRIC ان گاه کا ضلع	т			Dist	rict		
13. RELIGI	مذہب ON	MUSLI مسلم	Μ		NON M ر مسلم			14. DI	SABLITY	معذورى		YES		NO	
15. CURRENT پیشہ	OCCUPAT موجوده	GO GO	VERNMEN	T SERVA	NT		PRIVATE	SERVICE		IF JOBLE	SS		IF EX-SEI	RVICEMAN	•
				A. P	OST	AP	PLIE	نٹ D (ٹ	ت پوس	خواسد	(در.				
	4	26.	Suk	o-Er	ngin	eer	EI	ectr	oni	cs)	(Bl	PS-′	14)		
	Ρ	lease c	lo not c	damage	e this fo	orm by	folding	g it and o	comple	ete it w	vith CA	PITAL	etters		

براہ کرم اس فارم کو فولڈ کرکے ڈیمج نہ کریں، اور بڑے لیٹرز کے ساتھ مکمل کریں



FOR Provincial Assembly of Sindh (PAS) (544)

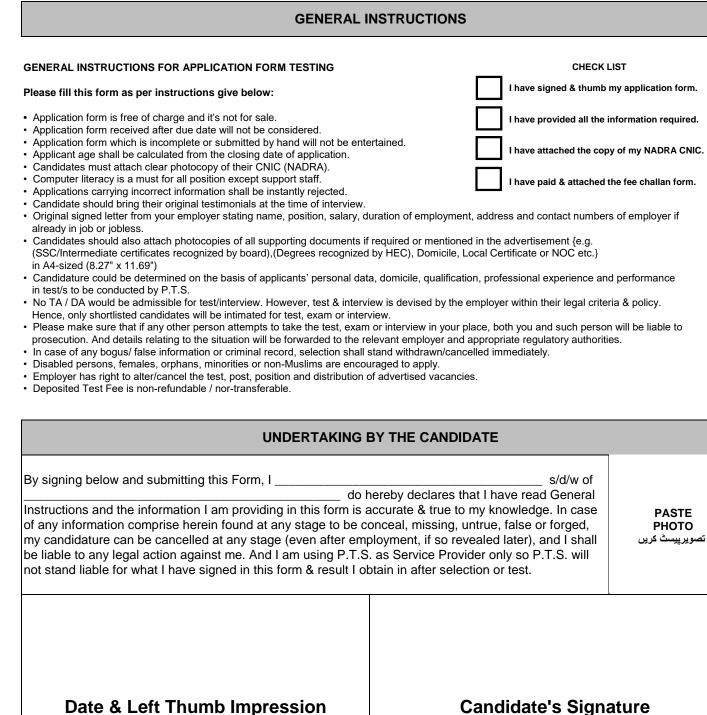
2,3

D. DESIRED TEST CENTER (برائے مہریاتی صرف ایک باکس منتخب کریں PTS will decide your final test center)(Please mark only one box)								
East Karachi		West Karachi			Sukkur	Hyderabad		
Mirpur Khas		Larkana			Nawabshah Or Shah	eed Benazirabad		
Final Test Centers are Subject to number of candidate								

F. ACADEMIC / QUALIFICATION SELECTION DATA (براہ کرم مکمل طور پر اور مناسب طریقے سے بھریں Please complete it properly)							
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.							

Certificate	Institution Name	Name of Diploma/Course	Dura	Total Duration	
/Diploma Level	Institution Name	& Certificate	From	То	Total Duration
Certificate					
Diploma					
Course					

		3 / PROFESSIONAL EXPERI العلم المريقے سے بھریں lete it properly	(براہ	
S.No#	Organization / Employer Name	Position (Working as)	 uration Ionth & Year To	Total Period Of Experience
1				
2				
3				
4				
Ε	=		(PAS)	(544)



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-Hag Road, Blue Area, ISLAMABAD.

PAKISTAN TESTING SERVICE

4

1

1

S PTS

2					
5	If payment made through following transaction Online Mobi	on, mark checker box and a	ttach proc Bar		^{it.} 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	Unite A/C Title: Pakista		g Service (F	
HBL A/C N	lumber: 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	osit Slip (PTS	Copy) & application	on 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		PK	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)	26. Sub-Engineer (Electronics) (BPS-14)	Applicant's Sign	ature		Cashier's Stamp
	Q	Applicant s olgh			
	~	σ	\sim		
	Bank Deposit Slip (Bank Copy)	Branch Name:			
PTS	ovincial Assembly of Sindh (PAS) (544)	Branch Code: Payment Date:			
	abib Bank Limited	Unite A/C Title: Pakista		k Limite g Service (F	
HBL A/C N	lumber: 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				
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		PK	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)	26. Sub-Engineer (Electronics) (BPS-14)	Applicant's Sign	ature		Cashier's Stamp
5	If payment made through following transaction Online Mobi	on, mark checker box and a	ttach proc Bar	•••	t.

E=

(PAS)	(544)
-------	-------