

APPLICATION FORM

درخواست فارم

PASTE PHOTO صویرییسٹ کریں

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FOR Provincial Assembly of Sindh (PAS) (544)

	(Ap	CAN plication					DATA lata or in					l)		
1. FULL NAME												A	В	С
پورا نام Write all in CAPITAL														
2. FATHER's NAME												X	Y	Z
والد كا نام Write all in CAPITAL														
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Re-enter														
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8. MOBILE NUMBER 2 مويانل فون كاتمبر	(+92)	0	3			-								Secondary (If any)
9. E-MAIL ADDRESS							<u>a</u>							
10. PRESENT														
ADDRESS Write all in CAPITAL موجودہ پتہ														
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	A. POST APPLIED (درخواست پوسٹ) 33. Care Taker (BPS-09)													

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

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FOR Provincial Assembly of Sindh (PAS) (544)



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SSC / Matr O-Level (10 Years																		
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(PAS) (544)

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PAKISTAN TESTING SERVICE



GENERAL INSTRUCTIONS

GENERAL INSTRUCTIONS FOR APPLICATION FORM TESTING		CHECK L	151
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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www.nte.org.nk	PTS Head Quarte	r, 3rd Floor, Ac	leel Plaza.
www.pts.org.pk	Fazal-e-Haq Road	-	

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(PAS) (544)

Bank Provin PTS Habib A/C Title: Pakistan HBL A/C Numl Please note: 1. Desired Bank Stam Applicant Full Name Father's Name	online Mobi k Deposit Slip (PTS Copy) ncial Assembly of Sindh (PAS) (544) b Bank Limited Testing Service (Pvt) Ltd-MCA ber: 0042-79916572-03 np is required on the Deposit Slip or attach electronic receipt	Branch Name: Branch Code: Payment Date: Unite A/C Title: Pakista	Bar ed Bar an Testin	nk Limite	(544) ed OBL Pvt) Ltd-MCA 701041			
Provine PTS Habib A/C Title: Pakistan HBL A/C Numl Please note: 1. Desired Bank Stam Applicant Full Name Father's Name Mobile Number CNIC Number	ncial Assembly of Sindh (PAS) (544) b Bank Limited Testing Service (Pvt) Ltd-MCA ber: 0042-79916572-03	Branch Code: Payment Date: Unite A/C Title: Pakista UBL A/C with deposit Slip. 2. Send Original Dep Bank Charges Or/lf/Any Other Applicable Charges	an Testin Numb	g Service (F er: 225	701041			
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Please note: 1. Desired Bank Stam Applicant Full Name Father's Name Mobile Number CNIC Number		with deposit Slip. 2. Send Original Dep Bank Charges Or/lf/Any Other Applicable Charges	osit Slip (PTS					
Applicant Full Name Father's Name Mobile Number CNIC Number	np is required on the Deposit Slip or attach electronic receipt	Bank Charges Or/lf/Any Other Applicable Charges		Copy) & application	. DTG 6///			
Father's Name Mobile Number CNIC Number		Applicable Charges	30-		on to PTS Office within due date.			
Mobile Number CNIC Number		Test Fee		Amount in words PKR	Thirty Rupees Only			
CNIC Number			999-	Amount in words PKR	Nine hundred & ninety nine Rupees Only			
		Deposited Amount		PKI	R 1029-			
		Total Fee	1029-	Amount in words PKR	One thousand & twenty nine Rupees only			
Post/Position Applied (Only for One Position)	33. Care Taker (BPS-09)	Applicant's Sign	ature		Cashier's Stamp			
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Bank	C Deposit Slip (Bank Copy)	Branch Name:						
Provir	ncial Assembly of Sindh (PAS) (544)	Branch Code: Payment Date:						
Habib Bank Limited A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA United Bank Limited A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA								
HBL A/C Num	ber: 0042-79916572-03	UBL A/C	Numb	er: 225	701041			
Please note: 1. Desired Bank Stam	np 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/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)	33. Care Taker (BPS-09)	Applicant's Sign	ature		Cashier's Stamp			
5 If pa	payment made through following transaction	on, mark checker box and a	ttach pro Bar	of of paymen	ıt.			