

APPLICATION FORM

درخواست فارم

FOR

State Life Insurance Corporation of
Pakistan (SLIC-PAK) (561)

PASTE
RECENT
PHOTO
حالیہ تصویر
پیست کریں

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| 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 |

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

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

| | | | | | | | | | | | | | | |
|---|----------|--|--|--|--|--|---|----------|--|--|--|--|--|--|
| 9. E-MAIL ADDRESS | @ | | | | | | | | | | | | | |
| 10. PRESENT ADDRESS Write all in CAPITAL موجودہ 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"/> |
|-------------------|----------------|--------------------------|------------------------|--------------------------|-----------------------|-----|--------------------------|----|--------------------------|

| | | | | | | | | |
|---------------------------------------|--------------------|--------------------------|-----------------|--------------------------|------------|--------------------------|------------------|--------------------------|
| 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 SELECTED / APPLIED پوسٹ / پوسٹ منتخب کی | |
| 03. Deputy Manager | <input type="checkbox"/> |

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(SLIC-PAK) (561)

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

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FOR
State Life Insurance Corporation of Pakistan (SLIC-PAK) (561)



| D. DESIRED TEST CENTER | | | |
|--|----------------------------------|----------------------------------|--------------------------------------|
| (PTS will decide your final test center)(Please mark only one box برائے مہربانی صرف ایک باکس منتخب کریں) | | | |
| Islamabad <input type="checkbox"/> | Lahore <input type="checkbox"/> | Karachi <input type="checkbox"/> | Quetta <input type="checkbox"/> |
| Peshawar <input type="checkbox"/> | Multan* <input type="checkbox"/> | Sukkur* <input type="checkbox"/> | Faisalabad* <input type="checkbox"/> |

***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 | | | | | | | |

| G. OTHER CERTIFICATION / DIPLOMA / COURSE / COMPUTER 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 | | | | | |

| 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 | | Total Period Of Experience |
| | | | From | To | |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |

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

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(SLIC-PAK) (561)

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
<http://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 must attach original proof of payment.
Otherwise it will not be acceptable and will stand ineligible.

**(SLIC)
(561)**Online ☐Mobile Paise ☐Bank ☐**Bank Deposit Slip (PTS Copy)**

State Life Insurance Corporation of
Pakistan (SLIC-PAK) (561)

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 Fee | 30- | Amount in words PKR | Thirty Rupees Only (Non Refundable / Nor Transferable) |
| Father's Name | | Test Fee (Inclusive of all Govt. Taxes) | 780- | Amount in words PKR | Seven Hundreds & Eighty Rupees Only (Non Refundable / Nor Transferable) |
| Mobile Number | | Deposited Amount | PKR 810- | | |
| CNIC Number (FRC, CRC or PV#) | | Total Fee | 810- | Amount in words PKR | Eight hundreds & ten Rupees Only (Non Refundable / Nor Transferable) |
| Post/Position Applied (Only for One Position) | 03. Deputy Manager | | Applicant's Signature | | Cashier's Stamp |

**Bank Deposit Slip (Bank Copy)**

State Life Insurance Corporation of
Pakistan (SLIC-PAK) (561)

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.

| | | | | | |
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| Post/Position Applied (Only for One Position) | 03. Deputy Manager | | Applicant's Signature | | Cashier's Stamp |

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If payment made through following transaction, mark checker box and must attach original proof of payment.
Otherwise it will not be acceptable and will stand ineligible.

Online ☐Mobile Paise ☐Bank ☐**E=****(SLIC-PAK) (561)**