

THE DISTRICT & SESSIONS COURT, QUETTA.

				For office use only	
	<u>APPLIC</u>	ATION FOR	<u>M</u>		
Post Applied for:					
Name:					
Father's/Husband Name:					
CNIC No: Date of Birth (As per Matric	culation Cer	rtificate)			
Day Month	Year				
Date of Birth (As per CNIC)					
Day Month	Year			05 Photographs	
Day Month	1 car				
Gender: Male	Female	<u> </u>			
Local: Domicile	e 🗌				
Permanent Address:					
Police Station:					
Present Address:					
Police Station:					
Are you a Government Servant? Yes No No					
•		Entr	ry in Government S	Service	
If yes (Departmental NOC must be attached)		Day	Month	Year	
Office Address:					
Phone (Office):		Phone (Ho	ome)		
Phone (Mobile): Email:					
Are you (a) Overage				ck the relevant)	
(C) Overage / Underage by		. ,	Yea	,	
(C) Overage/Underage by	Dorr	11/1041			
(C) Overage/Underage by	Day	Month	i i i i		
(C) Overage/Underage by Marital Status:					
		16. Ni	umber of Child	lren:	

Date: _____ Signature of the Applicant: _____

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ACADEMIC & PROFESSIONAL QUALIFICATIONS (Attach attested copies)

S. No.	Name of Examination / Degree	Name of Institution	Name of Board / University	Marks Obtained/Total	Grade / Division
1.	Matriculation Equivalent:				
2.	FA/FSc/I.Com/ICS/Intermediate Equivalent:				
3.	B.A./B.Sc/B.Com/ Equivalent:				
4.	MA/MSc/M.Com/ Equivalent:				
5.	Specialization/Certification				
6.	Typing / Shorthand Computer	Typing Speed : (WPM) Shorthand Speed : (WPM)			

Government Service Experience: (Attach Departmental NOC)

S. No.	Name of Department/ Organization	Designation & BPS	Date of Appointment	Year(s)	Month(s)	Day(s)
1.						
2.						
3.						

Date:	Signature of the Applicant:

AFFIDAVIT

I,	, s/o d/o w/o	do
hereby solemnly declare on oath the	at the information provided by me in this applicatio	n form and the
	f my knowledge and belief. In case of any wrong, disciplinary action may also be taken under the rules.	
Date:	Signature of the Applicant:	