

# Shaheed Benazir Bhutto University of Veterinary and Animal Sciences Sakrand.

# **APPLICATION FORM FOR ADMINISTRATIVE POSITIONS**

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DUCATIONAL Q	UALIFICATIONS ry School and Interi	_	· equivaleı	nt					
					Marks	Division /	Group		
obtained	College	From	То	- % age	WIALKS	Grade	Group		

Dograge	Name and Place of University and college	Years attended			ı	Divisi	Major	Specializati
		From	То	% age	CGPA	on	Subjects	on

#### (c) Other formal training

Certificate /	Name and Place of	Years a	ttended	Major / Specialization	
Diploma obtained	Institution	From	То		

#### • JOBS / SERVICES/ EXPERIENCE

Name of Post	BPS	Govt. / Semi / Private / Autonomous	Organizati on	e period To	Brief description of the job (Teaching/Research Administrative)

Note: Attach all experience certificates, otherwise you may disqualify for the above post

Do you possess all the qualifications mentioned in the advertisement? (Yes \_\_\_\_\_ No\_\_\_\_\_)

Have you suffered or suffering any physical disability. If yes, attach Medical Certificate. Yes \_\_\_\_No\_\_\_

Have you obtained the explicit permission of your present employer to apply for this post? Yes \_\_\_\_No\_\_

Write name and designation of your employer whom should write of your Confidential Record.

Time required before joining the post\_\_\_\_\_

# • FOLLOWING DOCUMENTS MUST BE ATTACHED HEREWITH

S#	PARTICULAR	DOCUMENTS ATTACHED		
		YES	NO	
1	Demand Draft of Rs.5,000/- for BPS-20			
2	Attested photocopy of valid CNIC.			
3	Four recent color photographs; one should be pasted on the application form.			
4	Photocopies of all the educational documents, degrees, transcripts, certificates verified by the issuing authorities.			
6	Attested Photocopy of Domicile & PRC			
7	Attested photocopies of experience certificates.			
8	Attested photocopies of training certificates.			
9	NOC from employer (if already employed)			

# • <u>DEMAND DRAFT ATTACHED</u>:

AMOUNT	DRAFT NUMBER	DATE	BANK NAME/BRANCH/CITY

# **DECLARATION**

I certify that the statements made by me in this application are true to the best of my knowledge and belief, and that I hold myself responsible for any discrepancy.

Date	Signature of the applicant
Dutc	bignature of the applicant