APPLICATION FORM
FEDERAL BOARD OF REVENUE, REVENUE DIVISION GOVERNMENT OF PAKISTAN
Office Of Model Customs Collectorate, Quetta
Applying for: Stenotypist (BPS-14)

Bank Online Deposit (*Note: Application Form will not be entertained without Original Deposit Slip.)

<table>
<thead>
<tr>
<th>Bank</th>
<th>Branch Code</th>
<th>Deposit Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALFALAH, (ANY BRANCH)</td>
<td></td>
<td></td>
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<tr>
<td>HBL, (ANY BRANCH)</td>
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<tr>
<td>ABL, (ANY BRANCH)</td>
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</tbody>
</table>

Note: Test Center in the desired city will be arranged for minimum of 200 applicants. Once selected a test center cannot be changed.

Test City: (Tick only one)

- ☐ Quetta

Domicile District: ----------------------------------

Note: ALL DATA FIELDS ARE REQUIRED. FILL YOUR APPLICATION FORM CAREFULLY.

Domicile Province: (Tick only one)

- ☐ Punjab
- ☐ Balochistan
- ☐ Sindh (U)
- ☐ Sindh (R)
- ☐ KPK
- ☐ Islamabad Capital Territory
- ☐ FATA
- ☐ Azad Jammu and Kashmir
- ☐ Gilgit Baltistan
- ☐ Other

1. Personal Information (In Block Letters)

Name (in Full):

Father’s Name:

CNIC/B-Form:

Age: _________ Date of Birth (D-M-Y) _____ - _____ - _____ Marital Status:

Postal Address:

Phone #: __________ Cell #: __________ (Do not give here Network converted mobile Numbers)

2. Academic Information (Note: In case of incomplete academic information, Your Application will be Declined.)

<table>
<thead>
<tr>
<th>Certificate/Degree</th>
<th>Degree Title</th>
<th>Major Subjects</th>
<th>Year of Passing</th>
<th>Marks Obtained</th>
<th>Total Marks</th>
<th>Grade/Percentage</th>
<th>Institution Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSC (10 years)</td>
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<tr>
<td>HSSC / DAE / A-Level</td>
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<tr>
<td>Bachelor (14 years)</td>
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<tr>
<td>Bachelor (H) / Master (16 years)</td>
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<tr>
<td>MS / M.Phil. (18 years)</td>
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<td>PhD</td>
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<tr>
<td>Other (Diploma / Certificate)</td>
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</tbody>
</table>

3. Employment Information (If Applicable) (Note: If you need more rows to write your information, you can add an additional page with Application Form.)

<table>
<thead>
<tr>
<th>Organization Type</th>
<th>Organization Name</th>
<th>Designation</th>
<th>Description</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Government / Semi Government / Private)</td>
<td>(Name of the Organization / Dept.)</td>
<td>(Your Designation / Position Title)</td>
<td>(Starting Date)</td>
<td>(End Date)</td>
<td></td>
</tr>
</tbody>
</table>
4. Undertaking by Applicant

I __________________________ d/s/w of __________________________ do hereby solemnly affirm that I have read and understood the conditions for applying in the above mentioned Post and that I have filled the form as per instructions given above and in the event any information contained herein is found to be untrue, I shall be liable to disciplinary action which may result in cancellation of my candidature & test.

Signature & Date: ........................................... Thumb Impression (Left Hand): ..............................................

Instructions:

- Application Fee (Service Charges) is nonrefundable / nontransferable. Bank Deposit of Rs. 60 /- (Sixty Rupees Only) must be attached with application form.
- In case of more than one application use separate application form along with original bank deposit slip.
- Application must reach OTS office latest by last date of submission of application form.
- OTS will not be responsible for late receiving of application through courier / Pakistan post etc.
- Attach your recent photograph, CNIC copy, original bank deposit slip.
- Without Signature & Thumb impression, your application form will not be entertained.
- Without photograph your application form will not be entertained.
- Incomplete forms will not be entertained. (All the fields are mandatory / Required)
- By hand submission of Application form is not allowed.
- Mobile phones are not allowed in test center premises.
- Please visit OTS website frequently for the test schedule/ other relevant details.

Document Check list:

Tick if the following documents are attached:

☐ Photograph.
☐ Original bank Deposit Slip is Attached on the back side of Application Form
☐ CNIC Copy

Cut Address box given below and affix it with gum on the envelope.

Send Registration Form to:

Manager Operations, (FBR)
Open Testing Service (OTS),
Office No 01, Central Avenue, Phase 6, Bahria Town, Islamabad
Help Line: 051 111 687 222 Email: info@ots.org.pk, Website: www.ots.org.pk
### OTS Copy

**Branch Code:**
**Date:**
**Branch Name:**

#### ONLINE DEPOSIT SLIP

**Remote Branch:** Habib Bank Limited, PWD Branch (2328)
**Account Title:** Open Testing Service
**Account Number:** 23287105336103
**Amount in Figures:** Rs. 60
**Amount in Words:** Sixty Rupees Only

*Note: Bank Service Charges Free of Cost*

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**Remote Branch:** Bank Alfalah Limited, PWD Branch (0335)
**Account Title:** Open Testing Service
**Account Number:** 0335001004927667
**Amount in Figures:** Rs. 60
**Amount in Words:** Sixty Rupees Only

*Note: Bank Service Charges Free of Cost*

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**Remote Branch:** ABL Islamic Banking, PWD Branch (6133)
**Account Title:** Open Testing Service
**Account Number:** 0020050208060021
**Amount in Figures:** Rs. 75
**Amount in Words:** Seventy Five Rupees Only

*Note: Inclusive of Bank Service Charges*

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- The Bank Must Return OTS Copy to the Candidate.
- Attach CNIC Copy with deposit slip.
- Application Form will be entertained without Original Deposit Slip.
- Application Form will not be entertained other than against Cash Payment.
- Full endorsement is required on both the Deposit Slip.
- Cash should always be deposited at the respective counter and electronic computer generated receipt printed through flatbed printer on deposit slip/tan/should be obtained before leaving the counter, otherwise the candidate will not be entertained.
- Deposit it in any one branch of the bank.
- Cash should always be deposited at the respective counter and electronic computer generated receipt printed through flatbed printer on deposit slip/tan/should be obtained before leaving the counter, otherwise the candidate will not be entertained.

### BANK Copy

**Branch Code:**
**Date:**
**Branch Name:**

#### ONLINE DEPOSIT SLIP

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**Applicant Name:**
**Applicant Father Name:**
**CNIC No. / Form B No.:**
**Applied For:**

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**Applicant Signature**

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**Cashier**

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**Applicant Signature**

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**Cashier**