

# SHAHEED BENAZIR BHUTTO UNIVERSITY SHERINGAL DIR UPPER, KPK

PH: +92944885529-570 Fax: +92944885805 **WEB:** <a href="http://www.sbbu.edu.pk">http://www.sbbu.edu.pk</a>

Position Applied For/ S.No of Post:	
Advertisement No:SBBU/Adv/	Fee Deposited/credited: Rs:
Bank Receipt No:	Bank Receipt attached at Page No.

#### PERSONAL INFORMATION

NAME: (In block Letters):	PASSPORT SIZE PHOTOGRAPH
F/NAME:	morodkarn
CNIC:DOMICILE	
RELIGION: GENDER:	
MARITAL STATUS:	
DATE OF BIRTH (In Figure)/ (in words)	
CONTACTS:	
PHONE (1)(2)	
CELL (1)(2)	
EMAIL (1) (2)  POSTAL ADDRESS:	
TOSTAL ADDRESS.	
PERMANENT ADDRESS:	

Note: Pho/Cell No, Mail Address and Email Address must be communicated in case of any change in that

# ACADEMIC RECORD

1	2	3	4	5	6	7
CERTIFICAT E/ DEGREE	BOARD/ UNIVERSITY	YEAR	Marks Obtained/Out of	% Age	Distinction (Gold Medal etc)	Copies attached From Page No
SSC						
HSSC						
BA/B.Sc/BCOM						
BS(HONS)(4Yrs)						
MA/M.Sc/LLB/						
M.COM						
MS/ M.Phil						
PhD						
Others						

Note: Page No of each copy of documents/proof must be clearly mentioned at column No.7. Page Numbering should be started from 04.

### **Research Publication:**

NUMBER OF PUBLICATIONS:	
*ATTACH AN EXTRA SHEET FOR FURTHER *ALSO SUPPLY A COPY OF REPRINTS OF EA	DETAILS CH PUBLICATION (From Pageto)

Note: Title of each publication and the journal in which the paper has been published must be clearly mentioned.

# **EXPERIENCE**

DESCRIPT	ION OF RELE	VAN	T SERVIC	E RECO	RD	
NAME OF INSTITUTION/ DEPARTMENT	Public/Private Sector	Private POST HELD IN BPS		PERI FROM	TO	Page No of certificates
				TROM	10	attached
LAST PAY DRAWN						
ΓEACHING EXPERIENCE:	Graduate Le	evel	Post Gra	duate Leve	el	Total
I Certify that the information co						
false statements reported on this	application may b	e con	sidered suffi	cient cause	for dismi	ıssal.
SIGNATURE OF THE APPLIC	CANT		Σ	DATE		
APPLICANT'S RECEIPT						
NAME:	F/NAN	1E:				
POSITION APPLIED FOR:			Γ	DATE:		
SIGNATURE:						
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