

Masters

Pak-Austria Fachhochschule:

Institute of Applied Sciences and Technology (PAF: IAST) Mang, Haripur, Khyber Pakhtunkhwa, Pakistan Ph: 0995-645112-18 Fax: 0995-645117; www.paf-iast.edu.pk

Application for th	ne Post of:		_		Please attach recent Photograph						
Bank Draft/Receipt No date		date	Bar	ık Name							
Instructions:											
 a. Hand-written applications will not be accepted. Please Type the information in each row and column of this Proforma very carefully. b. If a row or a column is not relevant, write "not applicable" or NA. c. Wherever necessary, use extra sheets for additional information d. Incomplete Proforma/application will not be entertained. 1. Basic Information:											
Name:			Father's Name:								
Date of Birth: D D - N Domicile:	1 M - Y	Y Y Y CNIC:	Age (at clos	ing date of application - months -	n): years						
Correspondence Address:			Permanent Home Address:								
Tel:											
Cell:											
Email:											
2. Education	onal Backgrour	nd:									
Education	Certificate / Deg	gree Mo	onth & Year	Awarding Institution	n Division/						
Level		of .	Award		% age						
SSC / O-Levels											
HSSC /A-Levels Bachelor											
□ 2 years											
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MS/M.Phil.													
PhD													
Any other													
Professional/													
Relevant													
Qualification													
3. Employr	ment Record/	Exper	ience	<u>):</u>									
Designation	Pay Scale		Dates		Name of Employer		Major Duties / Responsibilities						
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4. Total eli	gible service	of the	appl	icant for th	ne po	st	applied:						
	days	-	- months				years						
5. <u>Declarat</u>	<u>ion</u>												
I hereby declare belief. I undertak rejection of my a lead to dismissal.	te that any misi pplication and	represe even a	ntatic fter n	n/concealm	ent of	fa	cts in it shall re	esult in t					
icad to disimissan	termination in	om ser	vicc.										
Signature of Candidate													
		<u>For</u>	Offi	<u>cial Use (</u>	<u>Only</u>								
Application Stat	us after Scruti	ny:	Е	ligible			Not Eligible						
Remarks (if any)								_				
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(Signature of Official)