



Overseas Pakistanis Foundation Job Application Form for the post of Chief Financial Officer

Instructions:

- i. Personal Information should be in Capital Letters.
- ii. Properly filled \slash complete forms will only be considered.
- iii. No Column will be left blank (In case of non applicability NA / Nil should be filled).

Paste Passport Size Photo with Blue Background

PERSONAL INFORMATION								
1. Name:								
2. Father's Name:								
3. CNIC No.								
4. Religion: 5. Sect:								
6. Nationality: 7. Gender:								
7.Domicile: (Please tick the correct option) Islamabad Punjab Sindh (Urban) Sindh (Rural) Khyber Pakhtunkhwa Baluchistan FATA/Gilgit Baltistan A.J.K 8.Domicile District:								
9. Date of Birth (as per Matric Certificate): 10. Total Age as on 9 th March, 2020: Years Months Days								
11. Marital Status:								
13. Permanent Address:								
13. Fermanent Audress:								

14. Personal Contacts:									
a) Phone No. (With Area C	ode):			b) Mobile N	Vo:				
d) E-mail Address:									
			ACADEMIC 1	BACKGROUND					
Qualification (Starting from the latest Qualifications)									
Dogwoo Hold				Duration			Division/		
Degree Held	Field o	Study		stitution	From		То	CGPA	
PROVID	DE DETA	ILS OF P	ROFESSION	AL TRAINING , CI Pages if required)	ERTIFIC	ATIO	NS ETC.		
	4 °					Duration		tion	
Course/Diploma/Certifi	Course/Diploma/Certification		of Study	Institution]		From	То	
		AW	ARDS / ACHI	EVEMENTS (if any	7)				

EA	MPLOYMENT HISTORY (S	Starting from present	position)				
Total post qualification working	g experience till last date of s	ubmission of applica	tions i.e. <u>9.03.2020</u>				
	Years	Months	Days				
		Ex	Provide one				
Organization	Position	From	То	professional reference detail i.e. (Name, designation, contact numbers & email) (if available)			
a) Do you have any infection b) Do you have any disabile	on / disease such as AIDS, HI						
	DISCII	PLINE					
Have you ever been terminated fr Have you ever been punished by Give details	the Court of Law?		☐ Yes☐ No☐ Yes☐ No				
	UNDERTAKING /	DECLARATION					
By signing below and submitting			S/O, D/O	do			
hereby declare that:	,		,				
	form and personally filled it a	nd I understood all the	contents / columns tl	hat I have filled up			
•	d above, is accurate to the best			1			
_	any direct or indirect pressure		l lead to my disqualif	ication.			
_	a contained herein is found at		-				
•	e (even after employment, if so rev	-					
Signature of Applicant:			Date:				
