

JOB APPLICATION FORM

(To be filled & submitted by the candidate. Incomplete/late submitted form shall be rejected.)

| APPLICATION NO | | | |
|---|---|----------------------------|----------------------------|
| Advertisement Ref. No | Please attach recent | | |
| Payment of processing fee (as | photograph | | |
| slip at back side of this page. | <u>Fick (choose) only one fi</u> Bank Draft/ DD/ | rom following: 3 Online | |
| Challan | Postal Order | Deposit | |
| For Bank Draft/Demand Dra | ft/ Postal Order: | | |
| Bank Name: | Sr. No | Date: | |
| For Online: Bank Name with branch Code : | | | I |
| Transaction Number | | Date: | |
| Amount Deposited: Rs. | | | |
| Name of the Post app | | | |
| Name of the 1 ost app | | | |
| 1. Name of the Candi | date | | |
| 2 E-41 - 1/2 No. 10 | | (in capital letters) | |
| 2. Father's Name | | | |
| 3. Spouse's Name: | | | |
| 1 Duesent Addueses | | (for married candie | • |
| 4. Present Address: _ | | | |
| | | | |
| 5 Dama an ant Adduced | | | |
| 5. Permanent Address | · | | |
| | | | |
| | | | •1 |
| 6. E-mail Address | | 7. Domic | ile |
| 8. Candidate's Contac | :t No | | |
| 9 . Date of Birth | | (as recorded in the M | latriculation Certificate) |
| | | | |
| 10. Age (on closing da | te for advertisemen | nt): | |
| Years | Months | | Days |
| 44 | | | |
| 11. National Identity C | ard No. | - | |
| 12. Gender (Male / Fer | nale) | 13 . Religion: | |
| | - / | | |
| 14. Do you possess | the qualification | prescribed for th | ne post applied for? |
| (Yes/No) | | (as specified in the | e advertisement) |

| Subjects | Board / University | Year of Passing | Total Marks | Marks obtained | Division/ CGPA | Remarks/ Distinction |
|----------|--------------------|--------------------|----------------|-------------------|-------------------|-------------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

15.Academic Qualification: All the entries must be supported by certificates or degrees failing which no claim of Qualification will be maintainable. (All documents should be attested) Please mention details of all examinations / degrees and technical qualifications obtained, starting with Matriculation in the order in which passed.

Certificate / Degree

Matriculation

Intermediate

Graduation

(14 Years)

MPhil/MS

PhD

Others

BA/BSc. (Hons)/

Masters (16 years)

| | | | <u> </u> | |
|--|--|--|----------|--|
| | | | | |
| | | | | |
| | | | | |

| Page | 3 | of | 7 |
|------|---|----|---|
|------|---|----|---|

| | | | rd upto your present post. | | Total Experience = Duration | | Ionths |
|--------------------|--------------------|--------------------------------|----------------------------|------|--------------------------------|---------------------------------|---------|
| Post / Designation | Office /Department | Govt. / Semi Govt./ Private | Temporary / Adhoc | From | То | BS / TTS / Monthly Salary | Remarks |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

17. Professional Training (Please start from most recent training and list in descending order.)

| Course/ Diploma/ Certificate | Field of Study | Institution |
|---------------------------------|----------------|-------------|
| | | |
| | | |
| | | |
| | | |
| | | |

18. Research: (Give particulars of all post-graduate research work done. Please mention name of Institution and Professor under whose guidance the research was completed.)

| Program | Торіс |
|--------------------------|-------|
| BA/BSc (Hons)/ MA/MSc | |
| MS/MPhil | |
| PhD | |

19. List of Publications (Attach extra sheet if required.)

| Title of Research Paper | Name of Journal with ISSN and Impact Factor | Volume, Page No. & Year |
|-------------------------|--|----------------------------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |

20. Please explain why you would like to join GC University Lahore?

| c/ professional references) |
|-----------------------------|
| |
| Organization |
| Contact No |
| |
| _ Organization |
| Contact No |
| |

- 22. If your last service has been terminated by the Government for want of vacancy, please give dates of such service from ______ to _____.
- 23. If you are an ex-serviceman, please give the dates of your service in Armed Forces (as shown in the Discharge Certificate) from ______ to _____. Also mention rank at the time of release / discharge:_____
- 24. If you have ever been dismissed / terminated / removed from any Provincial/ Federal Govt./ Autonomous/ Semi-Autonomous Agency of the Federal or Provincial Government for reasons other than want of vacancy, mention post _____ Department ______ Year _____

and encircle the word applicable to you: Dismissed / Terminated / Removed

25. Write "Yes" or "No" against the certificates and other documents which you have attached with this application:-

| | | | (Yes / No) |
|----|------|---|------------|
| a) | i) | Matriculation | |
| | ii) | Intermediate | |
| | iii) | Graduation | |
| | iv) | Masters | |
| | v) | MPhil | |
| | vi) | PhD | |
| | vii) | Any other document | |
| b) | i) | Domicile Certificate | |
| | ii) | Experience / Service Certificate | |
| | iii) | Certificate of Distinction | |
| | iv) | Certificates of Co-Curricular Activities | |
| | v) | Any other document | |
| c) | i) | In case of Govt. Service, Departmental Permission Certificate from Appointing Authority. | |
| | ii) | In case the candidate has been terminated from any Government Service due to non- availability of a vacancy, Certificate of such Service. | |
| | iii) | In case of Ex-Serviceman, Discharge Certificate | |

<u>CHECK LIST</u> (Please attach attested copies of the relevant documents)

I do hereby solemnly declare that all the entries made and information supplied by me in this application form are correct to the best of my knowledge and belief. I fully understand that the facts given above will serve the basis for determination of my eligibility by the University and my candidature so determined by the University will stand provisional until it is verified with the original certificates at the time of test / interview.

Candidate's Signature: _____ Date: _____

GC UNIVERSITY LAHORE Certificate of Departmental Permission

To be submitted by the candidate who is in Govt. / Semi Govt. Service

1. The following particulars should be filled in by the candidate:-

| a) | Name | |
|------|----------------------|----------------------------|
| b) | Father's Name | |
| c) | Post held at present | |
| d) | Office / Department | |
| e) | Post applied for | |
| f) | Advertisement dated | |
| Date | ed: | |
| | | Signature of the Candidate |

2. (This portion should be filled in by the Department / Office.)

The above mentioned candidate has been permitted by this Office / Department to apply for the said post and that:-

- b) He / She holds this post in permanent / temporary or adhoc capacity.
- c) There is nothing on record of this Department which may render him ineligible for the post and that his / her record of service is satisfactory and no departmental proceedings / enquiry are pending against the candidate.
- d) If a Departmental candidate / employee is selected, he / she will be relieved by the Parent Department to join the post for which he / she has applied.

Signature Name and Designation of the Appointing Authority or Authorised Officer on his behalf

Dated: _____

| Condidate Name | |
|-----------------------|--|
| Postal Address: | |
| | City |
| Contact Nos | |
| Candidate Name: | |
| Postal Address: | |
| | City |
| Contact Nos | |
| Candidate Name: | |
| Postal Address: | |
| | City |
| | |
| Candidate Name: | |
| Postal Address: | |
| Contract No. | City |
| | |
| Candidate Name: | |
| Postal Address: | |
| | City |
| | |
| | |
| | GC University Lahore To be filled by the Candidate |
| | Application No |
| Name of the Candidate | |
| Name of post | |
| Received by | Dated: (Name & Signature) |