F/S for giving full-fledged University to existing campus of Abdul Wali Khan University (Lower Dir)

APPLICATION FORM
(Must be filled by the candidate)

Advertisement No:_____

POST APPLIED FOR: _____

Field of Specialization: _____

Photograph

NAME:_____ F/NAME: _____

Date of Birth: _____(dd/mm/yyyy) Age: _____(till the closing date of application)

Domicile/District:_____CONTACT# _____ Email: _____

Nationality: _____ Marital Status: _____ CNIC No:_____

Position/Distinction at University Level (Gold Medal, Silver Medal and Bronze Medal only):_____

Mailing Address (For Test, Interview Call): _____

_____

Permanent Address: _____

_____

ACADEMIC RECORD:

S#	DEGREE/CERTIFICATE	MARKS OBTAINED	TOTAL MARKS	PERCENTAGE/ CGPA	Date of Obtaining Degree	Division or Grade	BOARD/INSTITUTION/ UNIVERSITY
1.	Matriculation						
2.	Intermediate						
3.	Bachelors						
4.	Masters						
5.	M.Phil/ MS						
6.	PhD						
7.	Any Other Qualification						

Attested Copy of all Documents along with certificate of Distinction (if any) must be attached

EMPLOYMENT RECORD

Current Position (if Any): _____

NOC: ☐ Yes ☐ No

Total Experience: ☐ Years ☐ Months ☐ Days

S#	Name of Institute / Organization	Designation	Period		Total Period of Service		BPS or pay Scale if Any	Job Description (Teaching / Research / Admin)	Nature of Job (Permanent / Temporary/ Contract/ Fixed Pay, etc)
			From	To	Years	Months			
1									
2									
3									
4									
5									
6									
7									
8									
9									

NOC is must for those applying through proper channel
Attach Experience Certificate of Employment

PROJECTS:

S#	Title of Project	Funding/Sponsoring agency	Status of project (Completed/Secured,etc)	Total cost of project

All documents relating to research project including approval and sponsor letter must be attached

DETAILS OF TRAININGS

S#	Name of Institution	Type of Training	Period		Certificate or Diploma obtained
			From	To	

INSTRUCTIONS

(a) Please fill each row and column in this proforma very carefully and no column be left blank.

(b) If a row or a column is not relevant, write "Not Applicable" or "NA".

(c) Wherever necessary, use additional sheets for additional information.

(d) All entries in this form preferably be typed.

(e) Attested photocopies of all documents must be attached

(f) **Incomplete proforma will not be entertained.**

DECLARATION

I hereby declare that all the entries in this proforma and all the additional particulars (if any) furnished along with it are true to the best of my knowledge and belief. I understand that any misrepresentation of the facts in it shall result in the rejection of my application, and if an appointment has been accepted, dismissal from the service.

Dated : _____

_____
Signature of applicant

SCRUTINY COMMITTEE
(FOR OFFICE USE ONLY)

S.No	Name & Designation	Status	Signatures
1.		Convener	
2.		Member	
3.		Member	
Recommendations of the Scrutiny Committee			
(Tick the status√)		Eligible / Ineligible	