JOB APPLICATION FORM (HR-001)
(To be filled in Capital words for only one post)

**PAKISTAN INSTITUTE OF MEDICAL SCIENCES
MEDICAL TEACHING INSTITUTION, ISLAMABAD**

Post Applied for: _____ Job Advertisement No. _____

Deposit Slip No(If applicable): _____ Date : _____

Bank Name & Branch:_____ __

2x Photo

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1. Applicant's Name: _____ 2. Father/Husband name:_____

3. Date of Birth: _____ 4. Domicile: _____
   (day-month-year)   *(Distt. /Agency name)*

5. CNIC No._____ 6. Gender (Male/Female):_____

7. Email address: _____

8. Contact No. (Primary): _____ 9. Contact No.(Secondary): _____

10. Home Address: _____

11. Serving Relative at PIMS FMTI (If yes, give his name, designation & your exact relation): _____

_____

12. EDUCATIONAL QUALIFICATION (Starting from the recent one):

S#	Degree /Certificate	Name of Institution	Passing Year	Grade/Div/GPA
i				
ii				
iii				
iv				
v				
vi				

Applicant's Signature& Date: _____

13. EXPERIENCE (starting from recent one):

S#	Designation/ Post	Name of Organization	From	To	Total Experience	Reason for Leaving
I						
Ii						
Iii						
iv						

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14. Professional Courses / Training etc.(If any):

S#	Course/Training Title	Institute Name	From	To	Duration
I					
Ii					
iii					

15. Languages (with good fluency in writing and speaking**):**

i._____ii._____iii._____iv._____

16. Give Two Referee Names (Only Professional References are required):

1. Name: _____

Designation: _____

No. of Years of Acquaintance:_____

Contact No._____

Email Address:_____ __

2. Name: _____

Designation: _____

No. of Years of Acquaintance:_____

Contact No. _____

Email Address:_____

17. Applicant's Declaration: I, Mr./Ms…………………………………………………………………………, hereby solemnly affirm that the information given above are true, correct and that nothing have been concealed.

Applicant's Signature & Date: _____

(Note: Supporting Documents/credentials to be enclosed. Incomplete job application will not be considered.)