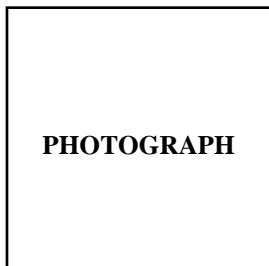


University of Kamalia, Kamalia

APPLICATION AND BIODATA FORM

(FOR NON-TEACHING POST)



- I. This form must be accompanied by
- (a) The original credit slip as a proof of payment made in Account No.0720930181002449 of MCB Bank, University of Agriculture, Faisalabad Branch (Code-1688), as advertised in the National Press.
 - (b) Attested copies of the relevant certificates and testimonials.
 - (c) A passport size of a recent photograph.
- II. Persons already in employment should submit their applications through proper channel. Advance copies may, however, be sent to save time. The requisite NOC from present employer must reach in the Office of the Registrar (Personnel Section) before or on the last date for receipt of applications or on the date of interview, failing which such candidates will not be allowed to appear for interview. The candidates who are living abroad and unable to appear before the Selection Board, their interviews will be conducted by the Selection Board through Video Conferencing/ SKYPE.
- III. All Government employees who intend to apply for any post through proper channel shall clarify through the Heads of their attached Departments that there is no pending enquiry/out-standing dues against them. Moreover, there are no adverse remarks in any of their ACR. These conditions are necessary for grant of Departmental Permission Certificate/NOC. The ACR grading for the last five years may also be recorded in the forwarding letter.
- IV. Incomplete Applications or those received after the due date will not be entertained.
- V. The University reserved the right not to fill any vacancy without assigning any reason therefore or consider a person for appointment in a lower cadre against the post advertised.
- VI. The applications complete in all respects are required in quadruplicate for the posts of Professor/Associate Professor (BPS & TTS)/Assistant Professor (TTS), in triplicate for the posts of Assistant Professor/Lecturer (BPS) and one copy of the application is required for non-teaching posts.
- VII. In case a candidate is not selected for the post applied for, he/she may take his/her material back from the Registrar's office (Personnel Section) within two months of the meeting of the Syndicate. Thereafter, such application would be destroyed.
- VIII. Additional sheets may be attached where column space is insufficient.

1. POST APPLIED FOR _____

2. FULL NAME (in block letters) _____

3. NATIONAL I.D. CARD NO

					-								-		
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4. SEX (Male/Female)_____

5. FATHER'S NAME _____

6. DATE OF BIRTH _____

7. ADDRESS:

(a) Present _____

(b) Permanent _____

I. Telephone number Office _____ Resident _____

II. Mobile number _____

III. E-mail address _____

8. DOMICILE DISTRICT _____

9. NATIONALITY OF: (a) Self _____

(b) Spouse _____

10. EDUCATIONAL QUALIFICATIONS(a) **Secondary School and Intermediate or equivalent**

Certificate obtained	Institution attended	Years attended		Percent/Marks/Division	Major Subjects
		From	To		

(b) **University**

Degrees obtained	Name and Place of University and college	Years attended		Percent Marks/Division/CGPA	Major Subjects
		From	To		

(c) **Other formal training**

Certificate / Diploma obtained	Name and Place of Institution	Years attended		Major Subjects Specialization
		From	To	
Post-Doctorate				

11. NUMBER OF STUDENTS GUIDED

	M.Sc. or equivalent	M.Sc. (Hons.)/M.Phil	Ph.D.
As major Supervisor			
As committee Member			

12. DISTINCTION

i) Academic _____

ii) Professional awards (Govt./Institution/Society) _____

iii) Sports (Intersarsity/National/International) _____

iv) Extra Curricular _____

13. COURSES TAUGHT (During last three years)

Course No. / Title	Year	Independent	Joint

14. FOREIGN LANGUAGES (Extent of Proficiency)

Language	Reading	Writing	Spoken

15. MEMBERSHIP OF LEARNED SOCIETIES (Name and nature of membership)

17. COUNTRIES VISITED

Country	Duration		Purpose
	From	To	

18. Do you possess all the qualifications mentioned in the advertisement? (Yes / No).

19. Minimum pay acceptable _____

20. Have you suffered or suffering any physical disability. If yes, attach Medical Certificate.

21. If you are under liability to repay money to any institution or person, state the particulars.

22. Have you obtained the explicit permission of your present employer to apply for this post?

23. Write name and designation of your employer whom should write of your Confidential Record.

24. Time required before joining the post _____

25. List of all documents attached with the application _____

26. **Original credit slip Attached:**

Amount	Number	Date	Bank Name/Branch/City

DECLARATION

I certify that the statement made by me in this application are true to the best of my knowledge and belief, and that I hold myself responsible for any discrepancy.

Date _____

Signature of the applicant