

**GOVERNMENT OF THE PAKISTAN
CABINAT SECRETERIAT
(AVIATION DIVISION)**

Screening Tests for Various Posts

Project ID: CSAD-001

Picture 1
Paste your recent
passport not older than
6 Months having
blue background size color
photograph with gum
تصویر لازماً منسلک کریں بصورت
دیگر فارم عمل میں نہیں لایا جائیگا۔

Eligibility Criteria:

| | | |
|---|------------------------------|-----------------------------|
| A. Is your Age according to the desired post at the date of Advertisement ? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| B. Is your Qualification & Experience according to the required post ? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| C. Is your Domicile according to the desired post as mentioned in advertisement ? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

If your reply is "Yes" to **A, B & C** above, only then please proceed further. Otherwise you are not eligible to apply

01. Bank Online Deposit

*Note: Application Form will not be entertained without Original Deposit Slip (ITS Copy)

02. Desired Post: To apply for more than one posts, please use separate form with separate fee. This form will be considered valid only for the first selected post in the sequence

01. Stenotypist(BPS-14)

02. LDC(BPS- 09)

Personal Information: Use CAPITAL letters and leave spaces between words.

02. Name in Full: _____

03. Father's Name: _____

04. Candidate CNIC #: _____
Write your own CNIC No. Or B Form No.

05. Gender: Male Female

06. Date of Birth: _____
Write your Correct Date of Birth otherwise you will be rejected

07. Postal Address: _____
All correspondence will be made on this address through courier service or ordinary postal service.

City: _____ District: _____

08. Phone No: (OFF) _____ (RES.) _____ (Mobile) _____
City Code - Phone No DO NOT give your portable mobile number (which is converted from one network to another) so that SMS delivery is ensured.

09. Are you a Government Servant? Yes No
In case of Yes, please attach NOC

10. Driving Licence? Yes No

11. Are you a Disabled Person? Yes No
If yes, please attach Disability Certificate

12. Domicile/Quota: Fill Only One Box (Mandatory)

| | | | |
|--|--|--|---|
| 01. <input type="checkbox"/> Islamabad | 02. <input type="checkbox"/> Punjab | 03. <input type="checkbox"/> Sindh Rural | 04. <input type="checkbox"/> Sindh Urban |
| 05. <input type="checkbox"/> KPK | 06. <input type="checkbox"/> Balochistan | 07. <input type="checkbox"/> AJK | 08. <input type="checkbox"/> Gilgit Baltistan |
| 09. <input type="checkbox"/> Merit | 10. <input type="checkbox"/> Minorities | 11. <input type="checkbox"/> Disable | |

District of Domicile _____

13. Desired Test City: Fill Only One Box (Mandatory)

(Subject to a minimum of 300 candidates, other wise the candidates will be assigned next nearest test city)

| | | | |
|---|---|---|--|
| 01. <input type="checkbox"/> Islamabad/RWP | 02. <input type="checkbox"/> Lahore | 03. <input type="checkbox"/> Karachi | 04. <input type="checkbox"/> Quetta |
| 05. <input type="checkbox"/> Peshawar | 06. <input type="checkbox"/> Abbotabad | 07. <input type="checkbox"/> Gilgit Baltistan | 08. <input type="checkbox"/> Multan |
| 09. <input type="checkbox"/> Hyderabad | 10. <input type="checkbox"/> Faisalabad | 11. <input type="checkbox"/> Muzaffarabad | 12. <input type="checkbox"/> Bahawalpur |
| 13. <input type="checkbox"/> D.G Khan | 14. <input type="checkbox"/> Rajankot | 15. <input type="checkbox"/> Sialkot | 16. <input type="checkbox"/> Muzaffargarh |
| 17. <input type="checkbox"/> Rahim Yar Khan | 18. <input type="checkbox"/> Pishin | 19. <input type="checkbox"/> Ziarat | 20. <input type="checkbox"/> Nushki |
| 21. <input type="checkbox"/> Sibi | 22. <input type="checkbox"/> Dera Bugti | 23. <input type="checkbox"/> Jaffarabad | 24. <input type="checkbox"/> Khuzdar |
| 25. <input type="checkbox"/> Kalat | 26. <input type="checkbox"/> Loralai | 27. <input type="checkbox"/> Zhob | 28. <input type="checkbox"/> Qilla Saifullah |
| 29. <input type="checkbox"/> Sargodha | 30. <input type="checkbox"/> Toba Tek Singh | 31. <input type="checkbox"/> Sheikhupura | 32. <input type="checkbox"/> Haripur |
| 33. <input type="checkbox"/> Bannu | 34. <input type="checkbox"/> Kohat | 35. <input type="checkbox"/> Dera Ismail Khan | 36. <input type="checkbox"/> Nowshera |
| 37. <input type="checkbox"/> Charsadda | 38. <input type="checkbox"/> Swat | 39. <input type="checkbox"/> Chitral | 40. <input type="checkbox"/> Mardan |
| 41. <input type="checkbox"/> Attock | 42. <input type="checkbox"/> Mianwali | 43. <input type="checkbox"/> Jhelum | 44. <input type="checkbox"/> Dadu |
| 45. <input type="checkbox"/> Badin | 46. <input type="checkbox"/> Mirpur Khas | 47. <input type="checkbox"/> Sukkur | 48. <input type="checkbox"/> Larkana |
| 49. <input type="checkbox"/> Jacobabad | 50. <input type="checkbox"/> Hunza | 51. <input type="checkbox"/> Rawalkot | |

14. Academic Information: (Please do not attach copies of your academic certificates at this stage.)

- Note: 1. ITS will not issue Roll No Slips to those who have not filled in their academic record properly.
 2. Candidate should convert their grades into marks. Level / A Level or any other degree having grade).
 3. Write exact degree name & major subject mention in certificate / transcript.
 4. Result awaiting candidates are not eligible.

| Certificate / Degree Level | Degree / Sanad Title | Specialization / Major Subject | Year Passing | Obtained Marks / CGPA | Total Marks / CGPA | Board / University / Institute |
|---|---|--------------------------------|--------------|-----------------------|--------------------|--------------------------------|
| Matric (10 Years) | | | | | | |
| Intermediate / D.A.E (12 / 13 Years) | | | | | | |
| Bachelor (14 Years) | <input type="checkbox"/> B.A <input type="checkbox"/> B.Sc <input type="checkbox"/> Other: _____ | | | | | |
| Bachelor (Hons) / Master (16 Years) | <input type="checkbox"/> M.A <input type="checkbox"/> M.Sc <input type="checkbox"/> Other: _____ | | | | | |
| MS / M.Phil (18 Years) | <input type="checkbox"/> MS <input type="checkbox"/> M.Phil | | | | | |
| Ph.D | | | | | | |

15. Employment Record: (Please do not attach copies of your experience certificates at this stage)

| Sr # | Organization / Employer Name | Job Title | Job Duration <small>Write only Month & Year</small> | |
|------|------------------------------|-----------|--|----|
| | | | From | To |
| 01 | | | | |
| 02 | | | | |
| 03 | | | | |

15. Total Job Relevant Experience as on closing date of application: Days - Months - Years

Undertaking By The Applicant:

I _____ d/s/w of _____ do hereby solemnly declare and affirm that I have read and understood the instructions and conditions for appearing in the ITS Test, and I have filled-up the application form as per instructions given below. In case of any information contained herein is found at any stage to be missing, untrue, false or forged, my candidature can be cancelled at any stage (even after employment, if so revealed later), and I shall be liable to legal action.

Date: _____ Thumb Impression _____ Candidate's Signature _____

Picture 2

Affix your recent passport size color photograph not older than 6 Months having blue background with Stapler

تصویر لازماً نسلیک کریں بصورت
دیگر فارم عمل میں نہیں لایا جائیگا۔

GENERAL INSTRUCTIONS / INFORMATION:

- Please fill the Application Form properly with complete and correct information / answers.
- Please DO NOT leave any field blank, otherwise your application will be rejected.
- Incorrect, false or forged information may result in cancellation of your candidature at any stage, even after employment, and also proceeding of a legal action.
- Attach your Three recent Passport Size Photographs, Copy of CNIC and Original Bank Deposit Slip (ITS Copy)
- By Hand submission of Application Form is not allowed.
- Mobile Phones or any Electronic Gadgets are not allowed in Test Center premises.
- Use separate envelope and separate application form for each post you are applying for.
- After 15 days of advertisement, application forms will not be entertained/accepted.
- Application should reach ITS office latest by last date of submission of Application Form.
- ITS will not be responsible for late receiving of application through courier / Pakistan Post etc.
- The fee is non transferable/refundable.

Send Registration Form to
Manager Operations (CSAD)
Interior Testing Services (ITS)
Gulberg Place Plaza, 4th floor, MPCHS, Sector
E-11/3 Markaz, Islamabad Pakistan

Help Line: 051-4441235 **Email:** info@itspak.org
Website: www.itspak.org



Interior Testing Services (ITS) ITS Copy

(*Please deposit fee at any HBL/MCB Bank LTD online Branch)

Branch Code _____

Date _____/_____/_____

Branch Name _____

HBL 

Remote Branch Online Branches Nationwide

Account Title Interior Testing Services

Account # 50127000567255

MCB 

Remote Branch Online Branches Nationwide

Account Title Interior Testing Services

Account # 0919404181005959

Note: Desired Bank stamp is required on deposit slip.

Applicant Name _____

Father Name _____

CNIC#/Form B# _____

Applied For _____

Domicile / District _____

Address _____

Mobile # _____

Qualification _____

Depositor CNIC# _____

Total Fee RS 89/-

Bank Charges _____

Deposit Amount RS 89/-

Amount In Figures _____

Amount In Words _____

Applicant Signature _____ Cashier _____

Project ID: CSAD:001

This fee is non Refundable Non Transferable



Interior Testing Services (ITS) Applicant Copy

(*Please deposit fee at any HBL/MCB Bank LTD online Branch)

Branch Code _____

Date _____/_____/_____

Branch Name _____

HBL 

Remote Branch Online Branches Nationwide

Account Title Interior Testing Services

Account # 50127000567255

MCB 

Remote Branch Online Branches Nationwide

Account Title Interior Testing Services

Account # 0919404181005959

Note: Desired Bank stamp is required on deposit slip.

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Domicile / District _____

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Bank Charges _____

Deposit Amount RS 89/-

Amount In Figures _____

Amount In Words _____

Applicant Signature _____ Cashier _____

Project ID: CSAD:001

This fee is non Refundable Non Transferable



Interior Testing Services (ITS) Bank Copy

(*Please deposit fee at any HBL/MCB Bank LTD online Branch)

Branch Code _____

Date _____/_____/_____

Branch Name _____

HBL 

Remote Branch Online Branches Nationwide

Account Title Interior Testing Services

Account # 50127000567255

MCB 

Remote Branch Online Branches Nationwide

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