

GOVERNMENT OF PAKISTAN
MINISTRY OF COMMUNICATIONS

Screening Test conduct by CTS
Apply for the post of

Picture
Please paste your recent passport size color photograph with gum

ASSISTANT (BS-15)

UDC (BS-11)

STENOYPIST (BS-14)

LDC (BS-09)

1. Bank Online Deposit from Designated Bank Branches.

Bank Branch/Code		Deposit Date	
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Note: Application Form will not be entertained without Original Deposit Slip of CTS copy.

2. Personal Information: Use CAPITAL letters only (Mandatory).

3. Name in Full:

4. Father's Name:

5. Candidate CNIC #: - -

6. Gender Male Female

7. Date of Birth: D D M M Y Y
 - -

8. Religion Muslim Non Muslim
In case of Non Muslim, specify your Religion. _____

9. Postal Address: _____

City: _____ District: _____

Phone (Res.) _____ (Office) _____ (Mobile) _____

10. Regional Quota/ Domicile: Fill only one box for Desired Province/Region of Domicile (Mandatory).

Punjab Sindh (R) KPK

11. Desired Test City: Fill only one Box (Mandatory).
(Subject to a minimum of 200 candidates, otherwise the candidates will be assigned next nearest test city).

Islamabad/Rwp Karachi Hyderabad Lahore

Multan Peshawar

12. Academic Information: (Do not attach copies of your academic certificates at this stage).

Note: CTS will not issue Roll No. Slips to those who have not filled in their academic record properly. Write exact degree name & major subject mention in certificate/transcript.

Certificate/ Degree level	Degree Title	Specialization/Major Subjects	Passing Year	Board/University/Institute
Matric/ (10 Years)				
Intermediate/ D.A.E (12/13 years)				
Bachelor (14 Years)				
Master/ (16 years)				
Higher (if any)				

13. Professional Qualification/Courses (Computer, Typing, Shorthand etc)

Certificate/Degree	Marks Obtained	Total Marks	Grade/Division	Board/University/Institute

14. Are you a Government Servant and applying through proper channel?

In case of Yes, NOC will be required at the time of interview

 Yes

 No
15. Employment Record:

Sr.#	Organization/Employer Name	Job Title	Job Duration	
			From	To
1.				
2.				
3.				

Days - Months - Years

16. Total Job relevant Post Qualification Experience as on closing date of applications:

17. Age Relaxation Claim: As per government rules.

The information provided for age relaxation claim will be verified and a certificate shall be required at the time of interview.

Undertaking By the Applicant:

I _____ d/s/w of _____ do here by solemnly declare and affirm that I have read and understood the instructions and conditions for appearing in the CTS 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, my candidature can be cancelled at any stage (even after employment, if so revealed later), and I shall be liable to legal action.

Date _____ Candidate's Signature _____

Picture 2

Affix your recent photograph with stapler

GENERAL INSTRUCTION/ INFORMATION:

- ✓ Please fill the Application Form properly with complete and correct information/ answers.
- ✓ Please do not leave any field blank, otherwise your application may not be considered.
- ✓ Incorrect or false information may result in cancellation of your candidature at any stage, even after employment, and also proceeding of a legal action.
- ✓ Attach your Two recent Passport Size Photographs, Copy of CNIC and Original Bank Deposit Slip (CTS Copy)
- ✓ By Hand submission of Application Form is not allowed.
- ✓ Please do not give your ported mobile number (which is converted from one network to another) so that SMS delivery is ensured.
- ✓ Mobile Phones or any Electronic Gadgets are not allowed in Test Center premises.
- ✓ Application Fee (Service Charges) is non-refundable/non-transferable.

Candidate's Signature _____

HELP LINE 051-2120100-272 www.cts.org.pk Email: pmmoc@cts.org.pk	Please Send Application Forms to Project Manager (MoC) M/s Candidates Testing Services Office No.6, 2nd Floor United Plaza, 96-E, Blue Area Islamabad
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Candidates Testing Services Pakistan

GOVERNMENT OF PAKISTAN
MINISTRY OF COMMUNICATIONS



Branch Name: _____

Branch Code : _____ Date: _____

Bank Copy

ONLINE DEPOSITE SLIP (* Please deposit fee any MCB Bank Ltd or BankIslami Pakistan Ltd online Branches)

Remote Branch : F-6 Markaz Super Market Islamabad A/C Title : Candidates Testing Services

 MCB Bank Ltd A/c No: 0807641201007160	 BankIslami Pakistan Ltd A/c No: 305300083970001
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(Note: Desired Bank Stamp is required on the Deposit Slip)

Applicant's Name:		
Father's Name:		
CNIC No/ B Form No:		
Post Name:	Project ID : MOC-106	
Test Processing Fees including all Govt tax Rs: 67/- B.S Charges Rs 20/- + 67	Amount Rs 87/-	Amount in words: Eighty-Seven Only (Non Refundable/ Non Transferable)

Applicant Signature

Cashier

Officer

The receipt of cash/cheque/instrument by the bank evidenced through this deposit slip will be valid only when this deposit slip has been signed and stamped by an authorized officer of the Bank.



Candidates Testing Services Pakistan

GOVERNMENT OF PAKISTAN
MINISTRY OF COMMUNICATIONS



Branch Name: _____

Branch Code : _____ Date: _____

CTS Copy

ONLINE DEPOSITE SLIP (*Please deposit fee any MCB Bank Ltd or BankIslami Pakistan Ltd online Branches)

Remote Branch : F-6 Markaz Super Market Islamabad A/C Title : Candidates Testing Services

 MCB Bank Ltd A/c No: 0807641201007160	 BankIslami Pakistan Ltd A/c No: 305300083970001
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Candidates Testing Services Pakistan

GOVERNMENT OF PAKISTAN
MINISTRY OF COMMUNICATIONS



Branch Name: _____

Branch Code : _____ Date: _____

Applicant's Copy

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