

## APPLICATION FORM

## Government of Pakistan

TAG # (For Official use)

(265)

## AHK National Centre for Rural Development, Islamabad Applying for: Watchman (BS-01)

Send Filled in Application form on the address mentioned below										Passport size Recent Photograph Affix with		
Note: ALL DATA FIELDS ARE REQUIRED. FILL YOU APPLICATION FORM CAREFULLY.						FILL YOUR		Gum (Latest By 6 months)				
	□ Punja	b	☐ Balochist	an 🗆	n 🗆 Sindh (U) 🗆 Sindh			n (R)		اس خان	آن کی تحدید	
Domicile Province:	□ КРК	☐ Islamaba		d Capital	Territory	□ F.	FATA	ATA			آپ کی تصویر اس میں ہونا ضرور;	
(Tick only one)	☐ Azad .	lamm	u and Kashmir		☐ Gilgit Ba		ıltistan 🗆 C					
1. Persona	l Informat	ion (	In Block Letters)						•			
Name (in Full):	:									Only One Circle in each Row.		
Father's Name:	: 		Religion:						<u> </u>	Muslim Non-Muslim		
CNIC/B-Form:			Are You D						Disable?	9 11 0 1		
Age:	Date o	_	Gender  Marital Status: Armed				○ Male ○ Female					
			, ,	Afficatore						es: Yes No resonnel of Armed Forces of Pakistan		
Postal Address	:								Deceased Servant: Yes No Deceased Civil Servant wife, son or daughter			
								Governm			Yes No	
Phone #:	hone #: Cell #: (Do not give here Network							, servanti.				
converted mobile Numbers) Scheduled Ca							d Cast /I	Buddhist: (	Yes \ \ \ \ No			
			(Note: In case of inc			on, Your Ap Year of			lined.) Total	Grade/	Institution	
Certificate	/ Degree	יע	egree Title	Мајог	Subjects	Passing	-	-	Marks	Percentage	Name	
Primary												
SSC (10 years)												
HSSC / DAE / (12 / 13 years)	A-Level											
Bachelor (14 y	ears)											
Bachelor(Hor (16 years)	ns)/Master											
MS / M.Phil. (	18 years)											
PhD												
Other (Diploma	/ Certificate)											
3. Employr	nent Infor	mati	ON (If Applicable ) (	Note: If you	need more rows	to write you	ur inform	nation, you c	an add a	n additional pag	e with Application	
Organization Type			Organization Name			Designation				Start Date	End Date	
(Government / Semi Government / Private)		(Name of the Organization / De		tion / Dept.)						Starting Date)	(End Date)	
					•						•	

4. Undertaking by Applicant  Id/s/w ofdo hereby solemnly
affirm that I have read and understood the conditions for applying in the above mentioned Post and that I have filled the form as per instructions given above and in the event any information contained herein is found to be untrue, I shall be liable to disciplinary action which may result in cancellation of my candidature at any stage.
Signature & Date:
Document Check list:
Tick if Attached / selected:
□ Photograph is Attached
☐ CNIC Copy is Attached on the back side of Application Form
<u>Instructions:</u>
ALL DATA FIELDS ARE REQUIRED TO BE FILLED. FILL YOUR APPLICATION FORM CAREFULLY.
In case of more than one apply use separate envelope.
<ul> <li>Application must reach AHK-NCRD office latest by last date of submission of application form.</li> </ul>
AHK-NCRD will not be responsible for late receiving of application through courier / Pakistan post etc.  And the second of
<ul> <li>Attach your recent photograph (Latest by 6 Months), CNIC copy.</li> <li>Without Signature &amp; Thumb impression, your application form will not be entertained.</li> </ul>
<ul> <li>Without signature &amp; Triumb impression, your application form will not be entertained.</li> <li>Without photograph your application form will not be entertained.</li> </ul>
• In-complete forms will not be entertained. (All the fields are mandatory / Required)
<ul> <li>In Person/By hand submission of Application form is not allowed.</li> </ul>
<ul> <li>Mobile phones or other electronic gadgets are not allowed in test center premises.</li> </ul>
Cut Address box given below and affix it with gum on the envelope.
×
Send Registration Form to:
Deputy Director (HR) AHK National Center for Rural Development Park
Road Chak Shahzad, Islamabad