

APPLICATION FORM
Upgradation Of Non Radiation Diagnostic Services, Pakistan Institute Of Medical Sciences Islamabad

TAG # (For Official use)

(267)

**Applying for: Medical Transcriptionist (BPS-12)** 

<b>Bank Online</b>	Deposit	(*Note: A	Application	Form wi	II not be e	ntertain	ed wit	hout O	riginal	Deposit S	lip.)		
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Name (in Full):										Note:	Tick Or	nly One Circle in	each Row.
Father's Name:										Religi	ion:	○ Muslim ○ N	lon-Muslim
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MS / M.Phil. (1	18 years)												
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Other (Diploma)	/ Certificate)												
3. Employn	nent Info	rmatio	<b>n</b> (If Applica	ble) (Note	e: If you ne	ed more i	ows to	write yo	our info	ormation, y	ou can a	dd an additional pa	ge with Application
Organizatio	on Type		Organizat			Ι	)esign	nation		Job Desc	ription	Start Date	End Date
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4. Undertaking by Applicant         Id/s/w of
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: Thumb Impression (Left Hand):
Document Check list:
Tick if Attached / selected:
□ Photograph is Attached
<ul> <li>□ Original bank Deposit Slip is Attached on the back side of Application Form</li> <li>□ CNIC Copy is Attached on the back side of Application Form</li> </ul>
Instructions:
<ul> <li>ALL DATA FIELDS ARE REQUIRED TO BE FILLED. FILL YOUR APPLICATION FORM CAREFULLY.</li> <li>Application Fee (Service Charges) is nonrefundable / nontransferable. Bank Online Deposit of Rs. 100/- must be attached with application form.</li> </ul>
<ul> <li>In case of more than one apply use separate application form along with original deposit slip.</li> <li>In case of more than one apply use separate envelope.</li> </ul>
<ul> <li>Application must reach OTS office latest by last date of submission of application form.</li> </ul>
OTS will not be responsible for late receiving of application through courier / Pakistan post etc.
<ul> <li>Attach your recent photograph (Latest by 6 Months), CNIC copy, original bank deposit slip with this application form.</li> <li>Without Signature &amp; Thumb impression, your application form will not be entertained.</li> </ul>
<ul> <li>Without Signature &amp; Thumb impression, your application form will not be entertained.</li> <li>Without photograph your application form will not be entertained.</li> </ul>
<ul> <li>In-complete forms will not be entertained. (All the fields are mandatory / Required)</li> </ul>
In Person/By hand submission of Application form is not allowed.
<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:

**Manager Operations Open Testing Service (OTS),** Office No 01, Central Avenue, Phase 6, Bahria Town, Islamabad

Help Line: 051-111 687 222 Email: info@ots.org.pk, Website: www.ots.org.pk

## Open Testing Service Innovation in Training & Assessment

## Open Testing Service Innovation in Training & Assessment

**BANK Copy** 

## **OTS Copy**

		//	Branch Code:		Date://			
Branch Name:	11 11111		Branch Name:					
ON	E DEPOSIT SLIP	ONLINE DEPOSIT SLIP						
Please deposit in only one bank & tick the relevant Bank			Please deposit in only one bank & tick the relevant Bank					
HBL HABIBBANK		Habib Bank Limited	HBL HABIB BANK		Habib Bank Limited			
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