



# APPLICATION FORM

Reg. No. \_\_\_\_\_  
To be Filled by NTS

## Health Department, Khyber Pakhtunkhwa Independent Monitoring Unit Government of Khyber Pakhtunkhwa

Project ID: N-20-4518

Screening Test for the Post of

**Monitoring & Data Collection Assistant (M/F)**

### Eligibility Criteria:

**Picture 1**  
Paste your recent passport size color photograph not older than 6 Months having blue background **with gum**

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

A. Is your age according to the desired post at the date of <b>08-09-2019</b> as mentioned in the advertisement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B. Do you possess required <b>Qualification / Experience</b> as asked in Advertisement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
C. Do you possess relevant area <b>Domicile</b> as advertised?	<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.

Bank Online Deposit of Rs: 460/- from Designated Bank Branches.

Bank Code	
Deposit Date	

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

Exemption of fee for **Disabled Person** only



Are you a Disabled Person?  Yes  No

معذور حضرات پر فیس لاگو نہیں ہوگی۔ براہ کرم نادرا کا جاری کردہ مخصوص قومی شناختی کارڈ بطور ثبوت لفب کریں۔ قومی شناختی کارڈ نہ ہونے کی صورت میں حکومت کے منظور شدہ ادارے سے جاری کردہ Disability Certificate لفب کریں۔ بصورت دیگر درخواست فارم عمل میں نہیں لایا جائیگا۔

### 01. District / Area of Domicile Applying For: Fill Only One Box for District / Area of Domicile Applying For. (Mandatory)

Relevant District / Area Positions (Candidates must be domiciled of the District / Area applying for)

Monitoring & Data Collection Assistant (Male / Female) (BS-16)	Newly Merged Tribal Area (Former FATA)					
	i. <input type="checkbox"/> Khyber	ii. <input type="checkbox"/> Bajaur	iii. <input type="checkbox"/> Mohmand			
	iv. <input type="checkbox"/> North Waziristan	v. <input type="checkbox"/> South Waziristan	vi. <input type="checkbox"/> Upper Kurram			
	vii. <input type="checkbox"/> Central / Lower Kurram	viii. <input type="checkbox"/> Orakzai				
	Former FR Regions					
	i. <input type="checkbox"/> Tank	ii. <input type="checkbox"/> D.I. Khan	iii. <input type="checkbox"/> Lakki			
	iv. <input type="checkbox"/> Bannu	v. <input type="checkbox"/> Kohat	vi. <input type="checkbox"/> Peshawar			

### 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.

05. Gender:  Male  Female

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

07. Postal Address: \_\_\_\_\_  
Only for Information: NTS will not issue Roll No Slips through courier/postal services. Candidate must required to take electronic print out of Roll No. (having picture of candidate) from NTS website for appearing in tests.

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 and applying through proper channel?  Yes  No  
In case of Yes, NOC will be required.

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

11. Religion:  Muslim  Non Muslim

12. Do you possess valid LTV Driving License?  Yes  No  
Will be required for selection

**13. Academic Information:** (Please attach attested copies of your academic certificates.)

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

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

**14. Relevant Employment Record:** (Please attach copies of your experience certificates)

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

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

**16. Desired Test City:** Fill Only One Box for Desired Domicile District **(Mandatory)**  
(Subject to a minimum of 200 candidates, otherwise the candidates will be assigned next nearest test city).

01.  Peshawar

02.  D. I. Khan

## 17. Age Relaxation Claim: Proof to be provided before selection. (Only 1 will be admissible)

A. Are you Govt. Employee and have completed 2 years continuous service on the closing date for receipt of applications? (10 years)

 Yes No

B. Are you a disabled person / \*\*Divorced Woman / Widow? (10 years)

 Yes No

### 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 NTS Test, and I have filled-up the application form as per criteria according. 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 منسلک 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 may not be considered.
- 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 Two recent Passport Size Photographs, Attested copies of CNIC, Domicile Certificate, Experience Certificates (If Any) and Original Bank Deposit Slip (NTS 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 envelop and separate application form for each post you are applying for.
- Last date for submission of application form is **Friday 8<sup>th</sup> November, 2019.**

### HELP LINE:

UAN : +92-51-844-444-1

Website : www.nts.org.pk

### Please Send Application Forms to:

**NATIONAL TESTING SERVICE (HQ)**

IMU KP (Project)

Plot 96, Street # 4 H-8/1, Islamabad.

Only for Information: NTS will not issue Roll No Slips through courier/postal services. Candidate must required to take electronic print out of Roll No. (having picture of candidate) from NTS website for appearing in tests.



## National Testing Service-Pakistan

Building Standards in Educational and Professional Testing

**NTS COPY**

Health Department, Khyber Pakhtunkhwa  
Independent Monitoring Unit

Branch Code: \_\_\_\_\_ Date: \_\_\_\_\_

Branch Name: \_\_\_\_\_

### ONLINE DEPOSIT SLIP

(\* Please deposit fee in only one bank & tick the relevant bank)

	<input type="checkbox"/>		<input type="checkbox"/>
Allied Bank Limited Formerly Allied Bank of Pakistan Limited		Muslim Commercial Bank	
A/C Title: NTS-Pakistan-Collection		A/C Title: NTS-Pakistan	
A/C No: 0010008325640110		A/C No: 0647943831005734	
Note: Bank Service Charges Free of Cost		Note: Bank Service Charges Free of Cost	
	<input type="checkbox"/>		
HBL HABIB BANK			
A/C Title: NTS Pakistan			
A/C No: 00427991771403			
Note: Bank Service Charges Free of Cost			

\*Note: Desired Bank Stamp is required on the Deposit Slip & Send Original Deposit Slip (NTS Copy) along Application Form to NTS Office

Application Form will not be entertained without Original Deposit Slip (NTS Copy)

**Last date for fee submission: Friday 8<sup>th</sup> Nov, 2019**

بینکر حضرات چالان پردی گئی آخری تاریخ کے بعد فیس وصول نہ کریں۔

Project ID:	<b>N-20-4518</b>
Applicant's Name:	
Father Name:	
CNIC No/ B Form No:	
Post Name:	

### GST INVOICE

NTN #	<b>2680612-6</b>
GST #	<b>3277876121192</b>
NTS fee:	<b>400/-</b>
GST@ 15%:	<b>60/-</b>
Total:	<b>460/-</b>
Amount in word: Rs.	<b>Four Hundred &amp; Sixty Rupees Only</b>
	<b>Non Refundable/ Non Transferable</b>

Applicant Signature \_\_\_\_\_ Cashier \_\_\_\_\_ Officer \_\_\_\_\_



## National Testing Service-Pakistan

Building Standards in Educational and Professional Testing

**BANK COPY**

Health Department, Khyber Pakhtunkhwa  
Independent Monitoring Unit

Branch Code: \_\_\_\_\_ Date: \_\_\_\_\_

Branch Name: \_\_\_\_\_

### ONLINE DEPOSIT SLIP

(\* Please deposit fee in only one bank & tick the relevant bank)

	<input type="checkbox"/>		<input type="checkbox"/>
Allied Bank Limited Formerly Allied Bank of Pakistan Limited		Muslim Commercial Bank	
A/C Title: NTS-Pakistan-Collection		A/C Title: NTS-Pakistan	
A/C No: 0010008325640110		A/C No: 0647943831005734	
Note: Bank Service Charges Free of Cost		Note: Bank Service Charges Free of Cost	
	<input type="checkbox"/>		
HBL HABIB BANK			
A/C Title: NTS Pakistan			
A/C No: 00427991771403			
Note: Bank Service Charges Free of Cost			

\*Note:

1. Please Stamp both copies of deposit Slip.
2. The Bank Must Return "NTS Copy" to the Candidate.
3. Deposit Slip will not accepted without Candidate CNIC/ B Form No.

**Last date for fee submission: Friday 8<sup>th</sup> Nov, 2019**

بینکر حضرات چالان پردی گئی آخری تاریخ کے بعد فیس وصول نہ کریں۔

Project ID:	<b>N-20-4518</b>
Applicant's Name:	
Father Name:	
CNIC No/ B Form No:	
Post Name:	

### GST INVOICE

NTN #	<b>2680612-6</b>
GST #	<b>3277876121192</b>
NTS fee:	<b>400/-</b>
GST@ 15%:	<b>60/-</b>
Total:	<b>460/-</b>
Amount in word: Rs.	<b>Four Hundred &amp; Sixty Rupees Only</b>
	<b>Non Refundable/ Non Transferable</b>

Applicant Signature \_\_\_\_\_ Cashier \_\_\_\_\_ Officer \_\_\_\_\_



## National Testing Service-Pakistan

Building Standards in Educational and Professional Testing

**CANDIDATE COPY**

Health Department, Khyber Pakhtunkhwa Independent Monitoring Unit

Branch Code: \_\_\_\_\_

Branch Name: \_\_\_\_\_

Date: \_\_\_\_\_

### ONLINE DEPOSIT SLIP

(\* Please deposit fee in only one bank & tick the relevant bank)

	<input type="checkbox"/>
Allied Bank Limited Formerly Allied Bank of Pakistan Limited	
A/C Title: NTS-Pakistan-Collection	
A/C No: 0010008325640110	
Note: Bank Service Charges Free of Cost	

	<input type="checkbox"/>
Muslim Commercial Bank	
A/C Title: NTS-Pakistan	
A/C No: 0647943831005734	
Note: Bank Service Charges Free of Cost	

	<input type="checkbox"/>
HBL HABIB BANK	
A/C Title: NTS Pakistan	
A/C No: 00427991771403	
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Project ID:	<b>N-20-4518</b>		
Applicant's Name:			
Father Name:			
CNIC No/ B Form No:			
Post Name:			
<b>GST INVOICE</b>			
NTN #	<b>2680612-6</b>	NTS fee:	<b>400/-</b>
GST #	<b>3277876121192</b>	GST@ 15%:	<b>60/-</b>
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		Amount in word: Rs.	<b>Four Hundred &amp; Sixty Rupees Only</b>
			<b>Non Refundable/ Non Transferable</b>

Applicant Signature \_\_\_\_\_

Cashier \_\_\_\_\_

Officer \_\_\_\_\_