

<u>APPLICATION FORM (ONLY FOR BPS-1 TO BPS-3)</u>

GOVERNMENT OF BALOCHISTAN

Director General, Social Welfare, Balochistan

Picture					
Please	Paste your	recent passport			
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Post	applied	tor:									
1. Bank Dep	osit challan	from design	ated Bank l	Branches							
Bank Branch/Code				Deposit Dat	te						
Note: Application	on Form will not	be entertained v	vithout original	Deposit Slip of (CTS copy.		•				
2. Personal	Information	: Use CAPITAI	L letters only (M	andatory)							
3. Name											
4. Father'	s Name										
5. CNIC N	Vo.				-					- 1	
6. Gender			Male		Female	7. Date of B	Birth D	ay N	Ionth	Ye	ar
8. Religion	1		Muslim		Non-Muslim	1	Muslim spe	oify your Bo	liaion		
9. Disable			Yes		No	In case of Non-Muslim, specify your Religion If yes, specify type of disability					
10. Postal Address:				City				Dist	rict		
Phone (Res)				Office		Mobile	Dist	District			
		cile (as men	tioned in dor	nicile certific	ate)	Wiobiic					
12. Quota					Balochistan Only						
13. Desire '(Fill only one Box (Subject to a mini the candidates will	(Mandatory) mum of 200 candi		Quetta Only Note CTS will not issue Roll No. Slips to those who have not filled in their academic record properly. Write								
14. Acade	1	nation:		me & major sub	ect mention in c						
Certificate/Degree level Degre		e Title Specializati		_	Passing Year	Grad Div		Board/University/ Institute		ty/	
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Middle											
Matric											
Higher (if a	ny)										
15. Profession	onal Qualific	cation/Cour	ses:								
Certificate/Degree Marks		Marks (Obtained Total Marks		Marks	Grade/Division		E	Board/University/ Institute		
16. Are you (In case of Yes,				through pr	oper channe	<u> </u> el?		\top	Yes	П	No
17. Employi											
Sr.No Organization/F					Job Title			Job Duration From To			
1							- '	rom	T	U	
	18. Total Job relevant post qualification experience as on closing date of applications Days Months Years					-					
							Days	Mon		Years	닉
verified and a certific				d in the advertisement	(The information pro	vided for age relaxation	on claim will be	Yes	<u> </u>	No	Ш
If yes please mention your age relaxation category:											

Under taking by	the applicant:			
I,	d/s/w of	do hereby	solemnly declare	
and affirm that I	have read and understood the instructions at	nd conditions for appe	aring in the CTS	
test and I have	filled-up the application form as per instr	ructions given below.	In case of any	Picture 2
information conta	Affix your recent			
cancelled at any s	photograph with stapler			
Date	Candidate's Signature	<u>-</u>		
C 1 I t	4°/T			

General Instructions/Information:

- ♦ Applications received after the closing date will not be entertained.
- ♦ Please fill the Application Form properly with complete and correct information/answers.
- ♦ Please do not leave any filed 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.
- ♦ Mobile Phones or any Electronic Gadgets are not allowed in Test Center premises.
- ♦ Application Fee (Service Charges) is non-refundable/non-transferable.
- ♦ Quota will be observed as per Government rules (as mention in advertisement).
- ♦ Government employee shall apply through proper channel.

HELP LINE 081-2442424 www.cts.org.pk Please Send application form to Project Manager (DG,SW) M/s Candidates Testing Services Office No.2, Block No.3, Civic Hardware Market near Chilton Ghee Mils Sirki Road, Quetta



Candidates Testing Services Pakistan

Branch Name.

Director Genera, Social Welfare, Balochistan

Bank Copy

	Brane	ch Code		Date:					
	ONLINE DEPOSITE S	LIP (* Please de	eposit fee any M	ICB Bank Ltd or	BankIslami Paki	stan Ltd online Branches)			
	Remote Branch: F-6 I	Markaz Supe	r Market Isla	mabad A/C	Title : Candi	dates Testing Services			
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MCB	MCB Bank Ltd A/c No: 08076412010			SAL		Islami Pakistan Ltd Vo: 305300083970001			
Bank for Life			C0000000000000000000000000000000000000						
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Father's N	ame:								
CNIC/B-F	orm No:								
Project ID:	:	DG,SV	W-1905	Post Name	e				
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Bank for Life	A/c No: 08076412010	07160		BankIslami	A/c N	No: 305300083970001			
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App	licant's Signature			shier		Officer			
	The receipt of cash/cheque/instrument by the	bank evidenced through	this deposit slip will be vi	alid only when this deposit	t slip has been signed and s	tamped by an authorized officer of the Bank.			