

APPLICATION FORM (ONLY FOR BPS-4 TO BPS-15)

GOVERNMENT OF BALOCHISTAN

	Picture	
Plea	ise Paste your recent passport	
size	cologyphotograph with gum	

Director General, Social Welfare, Balochistan

	for:									
1. Bank Deposit challan f	from design	ated Bank I	Branches							
Bank Branch/Code				Deposit Da	te					
Note: Application Form will not b				of CTS copy.						
2. Personal Information:	Use CAPITAL	L letters only (M	andatory)							
3. Name 4. Father's Name										
5. CNIC No.				<u> </u>						
					, ,				-	
6. Gender	Щ	Male	L	Female	7. Date of B	Birth Day	Mor	nth	Ye	ear
8. Religion		Muslim		Non-Muslim						
9. Disable		Yes		No	In case of Non-Muslim, specify your Religion If yes, specify type of disability					
					<u> </u>					
10. Postal Address:					City		Distric	t		
Phone (Res)			Office		Mobile					
11. District of Domic	ile (as ment	tioned in dor	nicile certi	ficate)		I .				
11. District of Donne	are (us men	troned in doi	inche cert	ircute)	<u> </u>					
12. Quota	Balochistan Only									
13. Desire Test City: Fill only one Box (Mandatory) Subject to a minimum of 200 candida he candidates will be assigned next n	Quetta Only									
	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.									
14. Academic Inform	19TIAN' I			•			emic reco	rd prop	erly. Wı	rite
14. Academic Inform Certificate/Degree level	19TIAN' I	exact degree na	me & major : Speciali	•					nivers	
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Under taking by the applicant:					
I, d/s/w of and affirm that I have read and understood the instructions and test and I have filled-up the application form as per instru information contained herein is found at any stage to be missing cancelled at any stage (even after employment, if so revealed late	d conditions for appearing in the CTS actions given below. In case of any g, untrue, false, my candidature can be	Picture 2			
DateCandidate's Signature					
General Instructions/Information:					
 ♦ Applications received after the closing date will not be entertaded Please fill the Application Form properly with complete and code Please do not leave any filed blank, otherwise your application Incorrect or false information may result in cancellation of you and also proceeding of a legal action. ♦ Attach your two recent Passport size photographs, copy of CN By hand submission of Application Form is not allowed. ♦ Mobile Phones or any Electronic Gadgets are not allowed in The Application Fee (Service Charges) is non-refundable/non-transet Quota will be observed as per Government rules (as mention in Government employee shall apply through proper channel. 	Forrect information/answers. In may not be considered. For candidature at any stage, even after of the considered of the considered. For Center premises. Insterable.	•			
Please Send application form to HELP LINE 081-2442424 www.cts.org.pk Project Manager (DG, SW) M/s Candidates Testing Service Office No.2, Block No.3, Civic Hardwar					

near Chilton Ghee Mils Sirki Road, Quetta

Candidate's Signature_____



Candidates Testing Services Pakistan

Branch Name.

Director General, 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	istan Ltd online Branches)	
	Remote Branch: F-6 I	Markaz Supe	r Market Isla	mabad A/C	Title : Cand	idates Testing Services	
	150D D 1711						
MCB	MCB Bank Ltd A/c No: 08076412010			BankIslami		KIslami Pakistan Ltd No: 305300083970001	
Bank for Life				***************************************			
Test Processing Fees including all Go			vt tax Rs.300/- l Amount Rs.300/-		sing Fees inci	uding all Govt tax Rs.300 Total Amount R	
Amount in w	ords: Rupees Three-Hu	aderd only/- Amount in word			words: Rupe	es Three-Hunderd only/-	•
Applicant's	s Name:						
Father's N	ame:						
CNIC/B-F	orm No:						
Project ID:	•	DG, S	W-1905	Post Name	9		
App	licant's Signature		Cas	shier		Officer	
•	The receipt of cash/cheque/instrument by the	bank evidenced through	this deposit slip will be v	alid only when this deposit	slip has been signed and s	stamped by an authorized officer of the Bank.	
		Candi	dates Testin	g Services P	akistan		
	CTS			ial Welfare, Balo		CTS	Copy
CANDIDATES TESTIN	G SERVICES Brane	ch Name				\$,	
		ch Code					
ONLI					or BankIslar	——— ni Pakistan Ltd online Bra	inches)
		_	-			idates Testing Services	,
			1		1		I
MCB	MCB Bank Ltd A/c No: 08076412010					KIslami Pakistan Ltd No: 305300083970001	
Bank for Life				BankIslami			
Test Process	ing Fees including all Go			Test Process	sing Fees incl	uding all Govt tax Rs.300	
		l Amount R				Total Amount R	
	vords: Rupees Three-Hu	naera only/-	•	Amount in v	words: Rupe	es Three-Hunderd only/-	•
Applicant's	s Name:						
Father's N	ame:						
CNIC/B-F	orm No:						
Project ID:	1	DG, S	W-1905	Post Name	9		
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App	licant's Signature		Cas	shier		Officer	
	The receipt of cash/cheque/instrument by the	bank evidenced through	this deposit slip will be v	alid only when this deposit	slip has been signed and s	stamped by an authorized officer of the Bank.	
		Candi	dates Testin	g Services P	akistan		
CANDIDATES TESTING	CTS	Direct	or General, Soc	ial Welfare, Balo	chistan	Applicar	nt's Copy
CANDIDATES TESTING	Branc	ch Name					
	Brane	ch Code		Date:			
ONLI	NE DEPOSITE SLIP (*	Please depos	sit fee any M	CB Bank Ltd	or BankIslar	ni Pakistan Ltd online Bra	inches)
	Remote Branch: F-6 I	Markaz Supe	r Market Isla	mabad A/C	Title: Cand	idates Testing Services	
	MCD D. J. L.	•			D1	T.I D. 12-4 T.4.1	
MCB	MCB Bank Ltd A/c No: 08076412010			BankIslami		xIslami Pakistan Ltd No: 305300083970001	
Bank for Life	in a Face in all din a all Car				in a Fasa in al	di	
l'est Process	ing Fees including all Go	vt tax Rs.300 I l Amount R		Test Process	sing Fees inci	uding all Govt tax Rs.300 Total Amount R	
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Amount in w	vords: Rupees Three-Hu	nderd only/-		Amount in v	words: Rupe	es Three-Hunderd only/-	
Applicant's	s Name:						
Father's Na	ame:						
CNIC/B-F	orm No:						
Project ID:	.	DG, S	W-1905	Post Name	9		
		, -					
App	licant's Signature	•	Cas	shier	-	Officer	
* 1	The receipt of cash/cheque/instrument by the	bank evidenced through	this deposit slip will be v	alid only when this deposit	slip has been signed and s	stamped by an authorized officer of the Bank.	