

APPLICATION FORM
Ten Billion Tree Tsunami Programme Ministry Of Climate Change Applying for: Wildlife / Biodiversity Officer (PPS-07)

TAG # (For Official use)

(278)

Bank Online	Denosit (*)	lote: Anr	lication Forr	n will not be e	entertained w	ithout O	riginal	Denosit S	lin)			
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Note: Test Center in the desired city will be arranged for minimum of 200 applicants. Once selected a test center cannot be changed. Passport size Recent												
□ Islamab		t	☐ Lahore	□ №	☐ Multan		☐ Karachi			Photograp	h Affix with	
Test City:	☐ Quetta		☐ Peshawar ☐ □		D.I. Khan		☐ Hyderabad			Gum (La	test By 6	
(Tick only one)		☐ Abbot		abad 🗆 G	ujranwala	ranwala		☐ Muzaffarabad		mor	nths)	
	☐ Gilgit		☐ Sargod	ha 🗆 S	ukkur		☐ Fa	isalabad			,	
Note: ALL DATA FIELDS ARE REQUIRED. FILL YOUR							JR	یر اس خانہ	آپ کی تصور			
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Province:	□ КРК		Islamabad	d Capital Te	rritory		FATA					
(Tick only one)	☐ Azad Ja	mmu an	d Kashmir		Gilgit Balt	istan		Other				
				•								
1. Persona	l Informati	on (In B.	lock Letters)									
Name (in Full):	:							Note:	Tick On	ly One Circle in e	ach Row.	
Father's Name:								Relig	ion: (○ Muslim ○ Non-Muslim		
CNIC/B-Form:								Are Y	ou Disak	ole?	Yes O No	
Λαοι	Data of	Dirth (D.	4.20	 				Gend	er:	○Male	○ Fe male	
Age:	Date of	יים) ווו נט-וי	л-Y) =		Marital Sta	tus:			d Forces	s: O nnel of Armed Force	Yes No	
Postal Address:	:									vant: Yes (
								Dece	ased Ci v	il Servant wife, sor	ordaughter	
								Gove	rnment	Servant:	Yes \ \ \ \ No	
Phone #:		Cell #: _			(Do not give here Network			Scheduled Cast / Buddhist: Yes No				
					converted mobile Numbers) Scheduled Cas			st/Buddhist: ()	Yes O No			
2. Academ	ic Informat	ion (Not	e: In case of in	complete acac	lemicinformati	on, Your A	Applicat	ion will be	Dedined.	.)		
Certificate			ee Title	Major S		Year of Passing	I	Marks otained	Total Mark	Grade/	Institution Name	
SSC (10 years)						<u> </u>						
HSSC / DAE /	A-Level											
(12 / 13 years)												
Bachelor (14 y												
Bachelor(Hon												
Bachelor(Hon (16 years) MS / M.Phil. (s)/Master											
(16 years)	s)/Master											
(16 years) MS / M.Phil. (s)/Master 18 years)											
(16 years) MS / M.Phil. (19 PhD Other (Diploma 3. Employi	s)/Master 18 years) 1 / Certificate)	nation	(IfApplicable)	(Note: If you ne	eed more rows	to write y	ourinfo	ormation, y	rou can ac	dd an additional pag	e with Application	
(16 years) MS / M.Phil. (19 PhD Other (Diploma 3. Employr Form.)	s)/Master 18 years) 1 / Certificate) ment Inform						ourinfo					
(16 years) MS / M.Phil. (19 PhD Other (Diploma Form.) Organization	s)/Master 18 years) 1 / Certificate) nent Information Type	0r	ganization 1	Name	Desig	gnation		ormation, y		Start Date	End Date	
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4. Undertaking by Applicant						
I d/s/w of	do hereby solemnly					
affirm that I have read and understood the conditions for applying in the above mentioned Post and that I						
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.						
und de, i shan be hable to disciplinary action winch may result incancenation of my candidature at any stage.						
Signature & Dates Thumb	maraggian (Laft Hand)					
Signature & Date: Thumb	mpression (Left Hand):					
Dogument Charlelist						
Document Check list:						

Tick if Attached / selected:

- ☐ Photograph is Attached
- ☐ Original bank Deposit Slip is Attached on the back side of Application Form
- \square CNIC Copy is Attached on the back side of Application Form

Instructions:

- ALL DATA FIELDS ARE REQUIRED TO BE FILLED. FILL YOUR APPLICATION FORM CAREFULLY.
- Application Fee (Service Charges) is nonrefundable / nontransferable. Bank Online Deposit of Rs. 84/- must be attached with application form.
- In case of more than one apply use separate application form along with original deposit slip.
- Application must reach OTS office latest by last date of submission of application form.
- OTS will not be responsible for late receiving of application through courier / Pakistan post etc.
- Attach your recent photograph (Latest by 6 Months), CNIC copy, original bank deposit slip with this application form.
- Without Signature & Thumb impression, your application form will not be entertained.
- Without photograph your application form will not be entertained.
- In-complete forms will not be entertained. (All the fields are mandatory / Required)
- In Person/By hand submission of Application form is not allowed.
- Mobile phones or other electronic gadgets are not allowed in test center premises.

Cut Address box given below and affix it with gum on the envelope.

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Send Registration Form to:

Manager Operation (MOC),
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 Code:		Date://			
Branch Name:		Branch Name:					
ONLINE DEPOSIT S	LIP PCode: 278	o	NLIN	E DEPOSIT SLIP PCode: 278			
Please deposit in only one bank & tick the	relevant Bank	Please dep	osit in o	nly one bank & tick the relevant Bank			
HBL HABIB BANK L	_imited	НВЬ НАВІВВАНК		Habib Bank Limited			
Remote Branch: Habib Bank Limited, P	WD Branch (2328)	Remote Branch:	Habi	b Bank Limited, PWD Branch (2328)			
Account Title: Open Testing Service		Account Title:	Oper	Testing Service			
Account Number: 23287106336103		Account Number:	2328	7106336103			
Amount in Figures: Rs. 84		Amount in Figures:	Rs.	84			
Amount in Words: Eighty Four Rupee	es Only	Amount in Words:		Eighty Four Rupees Only			
Note: Bank Service Charges Free of Cost		Note: Bank Service C	harges	Free of Cost			
A Bank Alfalah Bank Alfalah	Limited	A Bank Alfalah		Bank Alfalah Limited			
Remote Branch: Bank Alfalah, PWD Bra	anch (0335)	Remote Branch:	Bank	Alfalah, PWD Branch (0335)			
Account Title: Open Testing Service		Account Title:	Oper	n Testing Service			
Account Number: 0335001004927667		Account Number:	0335	001004927667			
Amount in Figures: Rs. 84		Amount in Figures:	Rs.	84			
Amount in Words: Eighty Four Rupee	es Only	Amount in Words:		Eighty Four Rupees Only			
Note: Bank Service Charges Free of Cost		Note: Bank Service C	harges	Free of Cost			
Allied Bank Allied Bank L	imited	Allied Bank	П	Allied Bank Limited			
Remote Branch: ABL Islamic Banking, I	PWD Branch (5133)	Remote Branch:	_	Islamic Banking, PWD Branch (5133			
Account Title: Open Testing Service	<u> </u>	Account Title:	_	n Testing Service			
Account Number: 0020050208060021		Account Number:	0020	050208060021			
Amount in Figures: Rs. 99		Amount in Figures:	Rs.	99			
Amount in Words: Ninety Nine Rupe	ees Only	Amount in Words:		Ninety Nine Rupees Only			
Note: Inclusive of Bank Service Charges		Note: Inclusive of Bank Service Charges					
The Bank Must Return OTS Copy to the Candidate. Attach CNIC Copy with deposit slip. Application Form will not be entertained without Original Deposit Slip. Application Form will not be entertained other than against cash pay FBP Endorsement is required on both the Deposit Slip. Deposit it in any online country wide branches. Cash should always be deposited at the respective counter and elerceipt printed through flatbed printer on deposit slip/challan should the counter, please be sure to check the receipt and satisfy tha account number and amount deposited are correctly printed failing responsible.	yment. ectronic computer generated d be obtained before leaving t complete details including	 Application Form will not be FBP Endorsement is require Deposit it in any online coun Cash should always be dep receipt printed through flath the counter. please be sur 	entertaine entertaine entertaine ed on both itry wide b osited at t ed printer e to checi	d without Original Deposit Slip. d other than against cash payment. the Deposit Slip.			
Applicant Name:		Applicant Name:					
Applicant Father Name:		Applicant Father I	Name:				
CNIC No. / Form B No.:		CNIC No. / Form	B No.:				
Applied For:		Applied For:					
Applicant Signature	Cashier	, Applicant Sig	nature	e Cashier			
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