

APPLICATION FORM



PAK QATAR FAMILY TAKAFUL LIMITED



Eligibility Criteria:

A. Is your age according to the prescribed age limit for the desired post?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B. Do you have requisite Qualification & Experience as mentioned in Advertisement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
C. Is your Domicile according to the desired post as mentioned in Advertisement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**PASTE YOUR RECENT
PASSPORT SIZE
COLOR
PHOTOGRAPH WITH
GUM**

If your reply is "Yes" to A, B & C above, only then please proceed further. Otherwise you are not eligible to apply.

01. Bank Online Deposit of Rs: 300/- from Designated Bank Branches.

*Note: Application form will not be entertained without original deposit slip (ATS Copy)

Bank Code	Deposit Date
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02. Desired Post:

Fill out the boxes against the posts you wanted to apply. Deposit Rs.300/- against each post you wanted to apply.

01. <input type="checkbox"/> Takaful Consultant	02. <input type="checkbox"/> Takaful Financial Advisor	03. <input type="checkbox"/> Takaful Development Manager
04. <input type="checkbox"/> Executive Development Manager	05. <input type="checkbox"/> Business Development Manager	

03. Province of Domicile: _____

04. Personal Information:

Use CAPITAL letters and leave spaces between words.

06. Name in Full:

07. Father's Name:

08. Candidate CNIC #:

09. Gender: Male Female

10. Have you any disability? Yes No

11. Date of Birth: -- Y Y

12. Email: _____

13. Postal Address: _____

_____ City _____ District _____

14. Phone No: (Res.) _____ (Mobile) _____

15. Are you a Govt serving employee? Yes No

16. Academic Information:

- Note:** 1. ATS will not issue Roll No Slips to those who have not filled in their academic record properly.
 2. Candidate should convert their grades into marks.
 3. Write exact degree name & major subject mentioned in certificate/ transcript.

Certificate/ Degree Name	Degree Title	Major Subject	Year Passing	Obtained Marks/CGPA	Total Marks/ CGPA	Board/ University
Matric (10 Years)						
Intermediate (12 Years)						
Graduation (14 Years)						
Master (16 Years)						
Others						

17. Employment Record:

Sr. No	Organization/ Employer Name	Job Title	Duration	
			From	To
01				
02				
03				

18. Total Job Experience: _____

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Undertaking by the applicant:

I _____ d/s/w of _____ do hereby solemnly declare that all the information provided by me in this application form and all the additional particulars/documents/ certificates furnished along with it are true to the best of my knowledge and belief and nothing has been concealed. I also declare that I have never been dismissed or removed from Govt service under any provincial, federal government autonomous and semi-autonomous or state enterprise. If any wrong or incorrect is found later, I shall be liable to disciplinary action which may result in cancellation of my candidature and even my employment.

Date:

Signature of the candidate:

Instructions:

- Fill the application form properly with complete and correct information.
- Do not leave any field blank, otherwise your application shall be rejected.
- Incorrect, false or forged information may result in cancellation of your candidature at any stage.
- Attach one recent passport size photograph & attested copy of CNIC.
- By hand submission of application form is not allowed.

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|---|
| <ul style="list-style-type: none">❖ Last Date for application submission is Tuesday, 28th January, 2020.❖ Application should reach ATS office latest by last date of submission of Application form.❖ ATS will not be responsible for late receiving of application through courier/ Pakistan post etc. |
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Please Send Application Forms to:

**Manager Operations (PQFT)
Allied Testing Services (ATS),
171-G, Street # 36, F-10/1,
Islamabad.
Help line: 051-2153577**



Allied Testing Services

ATS COPY

Pak Qatar Takaful

Branch Code: _____ Date: _____

Branch Name: _____

ONLINE DEPOSIT SLIP

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

HBL HABIB BANK A/C Title: Allied Testing Services A/C No: 50127000600355 Note: Bank Service Charges Free of Cost	<input type="checkbox"/>	SILKBANK A/C Title: Allied Testing Services A/C No: 50915000302677 Note: Bank Service Charges Free of Cost	<input type="checkbox"/>
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***Note:** Desired Bank Stamp is required on the Deposit Slip & Send Original Deposit Slip (ATS Copy) along Application Form to ATS Office

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

Project ID: PQT

Applicant's Name:
Father Name:
CNIC No/ B Form No:
Post Name:

Test Processing Fee: 250/-	Amount in word: Rs. Three Hundred Rupees Only Non Refundable/ Non Transferable
Mail Service: 50/-	
Total: 300/-	

Applicant Signature _____

Cashier _____

Officer _____



Allied Testing Services

CANDIDATE COPY

Pak Qatar Takaful

Branch Code: _____ Date: _____

Branch Name: _____

ONLINE DEPOSIT SLIP

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

HBL HABIB BANK A/C Title: Allied Testing Services A/C No: 50127000600355 Note: Bank Service Charges Free of Cost	<input type="checkbox"/>	SILKBANK A/C Title: Allied Testing Services A/C No: 50915000302677 Note: Bank Service Charges Free of Cost	<input type="checkbox"/>
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***Note:**

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

Project ID: PQT

Applicant's Name:
Father Name:
CNIC No/ B Form No:
Post Name:

Test Processing Fee: 250/-	Amount in word: Rs. Three Hundred Rupees Only Non Refundable/ Non Transferable
Mail Service: 50/-	
Total: 300/-	

Applicant Signature _____

Cashier _____

Officer _____



Allied Testing Services

BANK COPY

Pak Qatar Takaful

Branch Code: _____

Branch Name: _____

Date: _____

ONLINE DEPOSIT SLIP

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

HBL HABIB BANK A/C Title: Allied Testing Services A/C No: 50127000600355 Note: Bank Service Charges Free of Cost	<input type="checkbox"/>	SILKBANK A/C Title: Allied Testing Services A/C No: 50915000302677 Note: Bank Service Charges Free of Cost	<input type="checkbox"/>
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Project ID: PQT Mobile No: _____

Applicant's Name:	Father Name:
CNIC No/	Post Name:

Test Processing Fee: 250/-	Amount in word: Rs. Three Hundred Rupees Only Non Refundable/ Non Transferable
Mail Service: 50/-	
Total: 300/-	

Applicant Signature _____

Cashier _____

Officer _____