

APPLICATION FORM

Pakistan National Commission for UNESCO, Government of Pakistan Applying for: Assistant (BS-15)

TAG # (For Official use)

(302)

Note: Test Center in	the desired city v	vill be arranged for minim	um of 200 applic	ants. Once sele	ected a test cen	iter cannot be	changed.		
	☐ Islamaba	d 🗆 Lahore	☐ Mu	Multan 🔲 Karachi		i		Passport .	size Recent
Test City:	☐ Quetta	☐ Peshawar	□ D.I.	. Khan	☐ Hydera	abad		Photograp	h Affix with
(Tick only one)	☐ Sahiwal	☐ Abbottaba	d 🗆 Gu	jranwala	anwala 🗆 Muzaffa			Gum (Lo	atest By 6
	☐ Gilgit	☐ Sargodha		Sukkur 🗆 Faisalab				-	nths)
Domicile District: Note: ALL DATA FIELDS ARE REQUIRED. FILL YOUR APPLICATION FORM CAREFULLY.							7770	110113)	
Domicile Dist				ION FORM CA		II (D)		ر اس خانہ	آپ کی تصوی
Domicile	☐ Punjab			Sindh (U)		dh (R)			میں ہونا ضہ میں ہونا ض
Province:	□ КРК	☐ Islamab	ad Capital Ter		☐ FA	ΓΑ		<u>ک</u> ر 3333	5, 6.
(Tick only one)	☐ Azad Ja	ammu and Kashmir		Gilgit Bal	tistan 🗌	Other			
1. Persona	l Informati	on (In Block Letters)							
Name (in Full):	:					Note: 1	rick Only	One Circle in 6	each Row.
Father's Name	:					Religio	on:	Muslim ON	on-Muslim
CNIC/B-Form:						Are Yo	ou Disable	? 0	Yes
						Gende	er:		○ Female
Age:	Date o	f Birth (D-M-Y)		Marital Stat	tus:	— Armed	d Forces:	\circ	Yes O No
Postal Address								nel of Armed Force	
. 0010.7.00.000							sed Serva	nt: Yes (ervant wife, son	ONO Or daughter
							nment Sei		Yes No
Phone #:		Cell #:		(Do not sive	a bara Naturari			vane.	165 0116
					e here Networl nobile Numbei	C - II	uled Cast ,	/Buddhist: 🔘	Yes O No
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2 Academ	: - I f	in a second							
	1	ion (Note: In case of in	_		on, Your Applic Year of	ation will be D Marks	eclined.) Total	Grade/	Institution
Certificate	Degree	Degree Title	Major Su	abjects	Passing	Obtained	Marks	Percentage	Name
Primary									
SSC (10 years)									
HSSC / DAE / (12 / 13 years)	A-Level								
Bachelor (14 y	vears)								
Bachelor(Hor	ns)/Master								
MS / M.Phil.	(18 years)								
MS / M.Phil. (Other (Diploma	/ Certificate)	nation (If Applicable)	(Note: If you nee	ed more rows t	o write your in	nformation, vo	ou can add	an additional page	e with Application
MS / M.Phil. (Other (Diploma	/ Certificate)	nation (If Applicable)	(Note: If you nee	ed more rows t	o write your ir	nformation, yo	ou can add	an additional page	e with Application
MS / M.Phil. (Other (Diploma 3. Employr Form.) Organizati	n / Certificate) ment Inform on Type	Organization	Name	Desig	mation	Job Descri		Start Date	End Date
MS / M.Phil. (Other (Diploma 3. Employs Form.) Organizati (Government / Ser	n / Certificate) ment Inform on Type mi Government		Name	Desig (Your Designa	nation ation / Position	Job Descri			
MS / M.Phil. (Other (Diploma 3. Employr Form.) Organizati	n / Certificate) ment Inform on Type mi Government	Organization	Name	Desig (Your Designa	mation	Job Descri		Start Date	End Date
MS / M.Phil. (Other (Diploma 3. Employs Form.) Organizati (Government / Ser	n / Certificate) ment Inform on Type mi Government	Organization	Name	Desig (Your Designa	nation ation / Position	Job Descri		Start Date	End Date
MS / M.Phil. (Other (Diploma 3. Employs Form.) Organizati (Government / Ser	n / Certificate) ment Inform on Type mi Government	Organization	Name	Desig (Your Designa	nation ation / Position	Job Descri		Start Date	End Date
MS / M.Phil. (Other (Diploma 3. Employi Form.) Organizati (Government / Ser	n / Certificate) ment Inform on Type mi Government	Organization	Name	Desig (Your Designa	nation ation / Position	Job Descri		Start Date	End Date

4. Undertaking by Applicant I							
Signature & Date: Thumb Impression (Left Hand):							
Document Check list: Tick if Attached / selected: □ Photograph is Attached □ CNIC Copy is Attached on the back side of Application Form □ Original bank Deposit Slip 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. 75/-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 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. 							
Send Registration Form to:							
Manager Operation (UNESCO),							
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

OTS Copy

Open	Testing	Service
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Innovation in Training & Assessment

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Branch Code:	Date:/	î	Branch Code:		Date:/		
Branch Name:			Branch Name:				
ON	ILINE DEPOSIT SLIP PCode: 302	i	0	NI IN	E DEPOSIT SLIP PCode: 302		
	sit in only one bank & tick the relevant Bank	į			nly one bank & tick the relevant Bank		
HBL HABIB BANK	Habib Bank Limited		HBL HABIB BANK	П	Habib Bank Limited		
	Habib Bank Limited, PWD Branch (2328)	i	Remote Branch:	Habil	b Bank Limited, PWD Branch (2328)		
			Account Title:	Open Testing Service			
	ccount Number: 23287106336103		Account Number:	23287106336103			
Amount in Figures:	Rs. 75	i	Amount in Figures:	Rs.	75		
Amount in Words:	Seventy Five Rupees Only	į	Amount in Words:	Seventy Five Rupees Only			
Note: Bank Service Ch	arges Free of Cost	i	Note: Bank Service Charges Free of Cost				
		i					
A Bank Alfalah	Bank Alfalah Limited		A Bank Alfalah	П	Bank Alfalah Limited		
	Bank Alfalah, PWD Branch (0335)	i	Remote Branch:	Bank	Alfalah, PWD Branch (0335)		
Account Title:	Open Testing Service	i	Account Title:	Oper	n Testing Service		
Account Number:	0335001004927667		Account Number:	0335	001004927667		
Amount in Figures:	Rs. 75	i	Amount in Figures:	Rs.	75		
Amount in Words:	Seventy Five Rupees Only	i	Amount in Words:		Seventy Five Rupees Only		
Note: Bank Service Ch	arges Free of Cost	i	Note: Bank Service C	harges	Free of Cost		
Allied Bank	Allied Bank Limited		Allied Bank		Allied Bank Limited		
	ABL Islamic Banking, PWD Branch (5133)	i	Remote Branch:	ABL	Islamic Banking, PWD Branch (5133)		
Account Title:	Open Testing Service	i	Account Title:	Oper	n Testing Service		
Account Number:	0020050208060021		Account Number:	0020	050208060021		
Amount in Figures:	Rs. 90		Amount in Figures:	Rs.	90		
Amount in Words:	Ninety Rupees Only	i	Amount in Words:		Ninety Rupees Only		
Note: Inclusive of Bank		Note: Inclusive of Bar	ık Servi	ice 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 payment. 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 electronic computer generated receipt printed through flatbed printer on deposit slip/challan should be obtained before leaving the counter, please be sure to check the receipt and satisfy that complete details including account number and amount deposited are correctly printed failing which the bank will not be responsible.		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 payment. 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 electronic computer generated receipt printed through flatbed printer on deposit slip/challan should be obtained before leaving the counter, please be sure to check the receipt and saltisfy that complete details including account number and amount deposited are correctly printed failing which the bank will not be responsible.					
Applicant Name:			Applicant Name:				
Applicant Father N	ame:		Applicant Father I	Name:			
CNIC No. / Form B	No.:	į	CNIC No. / Form	B No.:			
Applied For:		 X	Applied For:				
 Applicant Sigr		×	Applicant Sig	ınature	 e Cashier		