**DIRECTORATE GENERAL POPULATION WELFARE,**

**KHYBER PAKHTUNKHWA**

## APPLICATION FORM (BPS-03)

### 01. Bank Online Deposit Slip of Rs: 90/- (Form Processing Fee).

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

| Bank Code | | | Deposit Date | |
|---|---|---|---|---|

ATTACH YOUR RECENT PASSPORT SIZE COLOR PHOTOGRAPH

01. Name of Post applied for: - _____ BPS _____

02. Name (in capital letters): _____

03. Father's Name: _____

04. Date of Birth (dd-mm-yyyy): _____

05. CNIC No. **(Attach copy)** | | | | | | - | | | | | | | | - | |

06. Domicile: District _____ Province _____

07. 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 Subjects | Year Passing | Obtained Marks/CGPA | Total Marks/ CGPA | Board/ University |
|---|---|---|---|---|---|---|
| **Primary** (05 Years) | | | | | | |
| **Middle** (80 Years) | | | | | | |
| **Matric** (10 Years) | | | | | | |
| **Intermediate** (12 Years) | | | | | | |
| **Bachelor** (14 Years) | | | | | | |
| **Diploma** | | | | | | |
| **Others** | | | | | | |

08. Presently in Job (Yes/No): _____ Government / Private

Number of Years: Government _____ Private _____

09. Contact No.: Mobile _____ Residence _____

10. Postal Address: _____

_____

11. Address as per Domicile: _____

_____

**Declaration**: I certify that all information, provided by me, in this Application Form is true and correct to the best of my knowledge and belief. I have informed my Head Office/Department that I am applying for this post (for government servants only).

Date: _____ Signature of Applicant: _____

## 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 two recent passport size photograph & attested copy of CNIC.
- By hand submission of application form is not allowed.
- Test fee is non-refundable and non-transferable.

- Last Date of the submission of Application Form is **Thursday, 13TH January, 2022.**
- Application Form 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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## Help Line:

**Ph: 051-2153577- 9**

**Website: www.ats.org.pk**

**Email: info@ats.org.pk**

## Please Send Application Forms

(Only through courier or Pakistan Post within due date)

**Manager Operations**

**(Project: DGPW3-KPK)**

**Allied Testing Services (ATS)**

**171-G, Street # 36, F-10/1, Islamabad**

## Allied Testing Services

**BANK COPY**

**Directorate General of Population Welfare, KPK**

Branch Code_____ Branch Name_____ Date_____

**ONLINE DEPOSIT SLIP**

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

| HBL HABIB BANK ☐ | SILKBANK ☐ |
|---|---|
| A/C Title: Allied Testing Services | A/C Title: Allied Testing Services |
| A/C No: 50127000600355 | A/C No: 50915000302677 |
| Note: Bank Service Charges: **Free of Cost** Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office. | Note: Bank Service Charges: **Free of Cost** Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office. |

| | | |
|---|---|---|
| **Test Processing Fee:** | **90/-** | **Amount in Words:** **Ninety Rupees only.** Non Refundable/ Non Transferable |
| **Total:** | **90/-** | |

| | |
|---|---|
| **Project Id:** | **PW-BPS03** |
| **Applicant's Name:** | |
| **Guardian's Name:** | |
| **CNIC No/ B Form No:** | |
| **Post Name:** | |

_____ _____

**Applicant Signature** **Cashier**

_____

**Officer**

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## Allied Testing Services

**CANDIDATE COPY**

**Directorate General of Population Welfare, KPK**

Branch Code_____ Branch Name_____ Date_____

**ONLINE DEPOSIT SLIP**

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

| HBL HABIB BANK ☐ | SILKBANK ☐ |
|---|---|
| A/C Title: Allied Testing Services | A/C Title: Allied Testing Services |
| A/C No: 50127000600355 | A/C No: 50915000302677 |
| Note: Bank Service Charges: **Free of Cost** Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office. | Note: Bank Service Charges: **Free of Cost** Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office. |

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| **Test Processing Fee:** | **90/-** | **Amount in Words:** **Ninety Rupees only.** Non Refundable/ Non Transferable |
| **Total:** | **90/-** | |

| | |
|---|---|
| **Project Id:** | **PW-BPS03** |
| **Applicant's Name:** | |
| **Guardian's Name:** | |
| **CNIC No/ B Form No:** | |
| **Post Name:** | |

_____ _____

**Applicant Signature** **Cashier**

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Officer

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## Allied Testing Services

**ATS COPY**

**Directorate General of Population Welfare, KPK**

Branch Code_____ Branch Name_____ Date_____

**ONLINE DEPOSIT SLIP**

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

| HBL HABIB BANK ☐ | SILKBANK ☐ |
|---|---|
| A/C Title: Allied Testing Services | A/C Title: Allied Testing Services |
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_____ _____

**Applicant Signature** **Cashier**

_____

**Officer**