

## APPLICATION FORM

## **Establishment of Seed Certification Laboratory in**

Seed Certification Laboratory in

(364) Khuzdar and Turbat
Applying for: Seed Analyst (PPS-7)

TAG # (For
Official use)

Note: Test Center in	the desired city will be	arranged for minimu	ım of 200 applic	ants. Once sele	cted a test cent	ter car	nnot be ch	nanged.				
	☐ Islamabad	☐ Lahore			ni			Passport size Recent				
Test City: ☐ Quetta		☐ Peshawar	□ D.I	I. Khan	Khan 🗆 Hyderab		ad		Photograph Affix with			ix with
(Tick only one)	☐ Sahiwal	Sahiwal				farab	oad		Gum (Latest By 6			
	☐ Gilgit	☐ Sargodha	☐ Su	kkur	☐ Faisalabad			months)				
Domicile District:  Note: ALL DATA FIELDS ARE REQUIRED. FILL YOUR APPLICATION FORM CAREFULLY.												
	1	1					D)		y:1		'	3ip
Domicile	☐ Punjab								y 3p3 ¹:p i			
Province:	□ КРК											
(Tick only one)	Azad Jamn	nu and Kashmir		Gilgit Bal	tistan 🗌	0	ther					
1. Personal I	1. Personal Information (In Block Letters)											
Name (in Full):	•	Dioen Botton					Note: T	Γick On	ly One Circl	le in ea	ach R	ow.
Father's Name:					Religion:				Muslim Non-Muslim			
						$\overline{}$	Any Di	sability			Yes	○ No
CNIC/B-Form:							(If Yes	Please S	Specify)		103	
Age:	Date of Bir	th (D-M-Y)	N	/Jarital Status	S:							
							Gende	r:	<u> </u>	Иale	TC	) Female
Postal Address:							Forces	es: Yes No				
	-					_			onnel of Arme			
Deceased Servant: Yes No  Deceased Civil Servant wife, son or daughter												
Email #:	Cell	#:		(Do not give	here Network	,						<u> </u>
(Do not give here Network converted mobile Numbers)  (Do not give here Network converted mobile Numbers)  Government Servant: Yes No												
2. Academic Information (Note: In case of incomplete academic information, Your Application will be Declined.)  Certificate/Degree Degree Title Major Subjects Year of Marks Total Grade/ Institution												
Certificate	/Degree I	Degree Title	major 5	ubjects	Passing	Obta		Marks				ame
Primary												
SSC (10 years)												
HSSC / DAE /	A-Level											
(12 / 13 years) <b>Bachelor</b> (14 years)	pars)											
Bachelor (Hor	-											
(16 years)												
MS / M.Phil. (1												
Other (Diploma												
<b>3. Employm</b> Form.)	ent Informatio	<b>) (If Applicable )</b> (No	te: If you need	more rows to v	rite your infoi	rmatio	on, you ca	an add a	n additional p	agewit	h App	lication
Organizati	on Type	Organization	Name	Desig	nation	Jo	ob Descri	ption	Start Da	te	En	d Date
(Government / Semi Government / Private)		(Name of the Organization / Dept.)		(Your Designation / Position Title)					(Starting Date)		(End Date)	
/ Priva	iej				uej							

4. Undertaking by Applicant						
Id/s/w of	dc		solemnly			
affirm that I have read and understood the conditi	ions for applying in the above mentioned	d Post and t	that I have			
filled the form as per instructions given above and in the event any information contained herein is found to be untrue, I shall be liableto disciplinary action which may result in cancellation of my candidate ureat any stage.						
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
- ☐ Attested Copies Of Educational Documents And Experience Letter Attached

## **Instructions:**

- ALL DATA FIELDS ARE REQUIRED TO BE FILLED. FILL YOUR APPLICATION FORM CAREFULLY.
- 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.

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

× .....

Send Registration Form to:

Manager Operation (ESCLKT), 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