

APPLICATION FORM (C)

Reg No: _____



KHYBER PAKHTUNKHWA TECHNICAL EDUCATION & VOCATIONAL TRAINING AUTHORITY (TEVTA)



Eligibility Criteria: **BPS-16 & Below- Management Cadre**

A. Is your age according to the prescribed age limit for the desired post on the closing date of Application Form?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B. Do you have requisite Qualification & Experience as mentioned in Advertisement on the closing date of Application Form?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
C. Are you domiciled in KPK and Newly Merged Tribal Districts ?	<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. Desired Post: Deposit test fee against the post you want to apply

01. <input type="checkbox"/> Office Assistant BPS-16	02. <input type="checkbox"/> Budget Assistant BPS-16	03. <input type="checkbox"/> Junior Office Assistant BPS-14
04. <input type="checkbox"/> Sub Engineer Civil BPS-14	04. <input type="checkbox"/> Store Keeper BPS-09	

02. Desired Test City: Fill only one box (Mandatory).

01. <input type="checkbox"/> Islamabad	02. <input type="checkbox"/> Peshawar	03. <input type="checkbox"/> Bannu
04. <input type="checkbox"/> Dera Ismail Khan	05. <input type="checkbox"/> Swat	06. <input type="checkbox"/> Abbottabad

03. District of Domicile: Fill only one box (Mandatory).

01. <input type="checkbox"/> Abbotabad	02. <input type="checkbox"/> Bannu	03. <input type="checkbox"/> Battagram	04. <input type="checkbox"/> Buner	05. <input type="checkbox"/> Charsadda
06. <input type="checkbox"/> Chitral	07. <input type="checkbox"/> D.I Khan	08. <input type="checkbox"/> Hangu	09. <input type="checkbox"/> Haripur	10. <input type="checkbox"/> Karak
11. <input type="checkbox"/> Kohat	12. <input type="checkbox"/> Kohistan	13. <input type="checkbox"/> Lakki Marwat	14. <input type="checkbox"/> Lower Dir	15. <input type="checkbox"/> Malakand
16. <input type="checkbox"/> Mansehra	17. <input type="checkbox"/> Mardan	18. <input type="checkbox"/> Nowshera	19. <input type="checkbox"/> Peshawar	20. <input type="checkbox"/> Shangla
21. <input type="checkbox"/> Swabi	22. <input type="checkbox"/> Swat	23. <input type="checkbox"/> Tank	24. <input type="checkbox"/> Tor Ghar	25. <input type="checkbox"/> Upper Dir
26. <input type="checkbox"/> Bajaur	27. <input type="checkbox"/> Mohmand	28. <input type="checkbox"/> Khyber	29. <input type="checkbox"/> Orakzai	30. <input type="checkbox"/> Kurram
31. <input type="checkbox"/> North Waziristan	32. <input type="checkbox"/> South Waziristan			

04. Age Relaxation Claim: Proof to be provide at the time of selection. (Only 1 will be admissible)

A. Are you Govt. Employee and have completed 2 years continuous service on the closing date

for receipt of Applications? (10 Years)

<input type="checkbox"/> Yes	<input type="checkbox"/> No
------------------------------	-----------------------------

B. Are you a disabled person/ **Divorced Woman/ Widow?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
------------------------------	-----------------------------

C. Do you belong to Backward areas of Khyber Pakhtunkhwa?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
------------------------------	-----------------------------

D. Are you Employee/ Ex-Employee of Govt. Departmental Project?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
------------------------------	-----------------------------

(If yes, then specify your duration of service in Govt. Project: _____ years, _____ Months.)



Allied Testing Services



BANK COPY

Khyber Pakhtunkhwa Technical Education & Evaluation Authority

Branch Code _____ Branch Name _____ Date _____

ONLINE DEPOSIT SLIP

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

 <input type="checkbox"/>		 <input type="checkbox"/>		Test Processing Fee: 199/- GST 16%: 32/- Bank Charges (For Transaction Verification): 14/- Total: 245/- GST#: 3277876150963	Amount in Words: Two Hundred and Forty Five Rupees Only. Non Refundable/ Non Transferable NTN#: 5013176-5
A/C Title: Allied Testing Services A/C No: 50127000600355 Note: Bank Service Charges: Free of Cost Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office.		A/C Title: Allied Testing Services A/C No: 00150981013676011 Note: Bank Service Charges: Free of Cost Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office.			
Project Id:	TEVTA-KPK				
Applicant's Name:					
Guardian's Name:					
CNIC No/ B Form No:					
Post Name:					
			Applicant Signature _____	Cashier _____	
			Officer _____		



Allied Testing Services



CANDIDATE COPY

Khyber Pakhtunkhwa Technical Education & Evaluation Authority

Branch Code _____ Branch Name _____ Date _____

ONLINE DEPOSIT SLIP

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

 <input type="checkbox"/>		 <input type="checkbox"/>		Test Processing Fee: 199/- GST 16%: 32/- Bank Charges (For Transaction Verification): 14/- Total: 245/- GST#: 3277876150963	Amount in Words: Two Hundred and Forty Five Rupees Only. Non Refundable/ Non Transferable NTN#: 5013176-5
A/C Title: Allied Testing Services A/C No: 50127000600355 Note: Bank Service Charges: Free of Cost Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office.		A/C Title: Allied Testing Services A/C No: 00150981013676011 Note: Bank Service Charges: Free of Cost Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office.			
Project Id:	TEVTA-KPK				
Applicant's Name:					
Guardian's Name:					
CNIC No/ B Form No:					
Post Name:					
			Applicant Signature _____	Cashier _____	
			Officer _____		



Allied Testing Services



ATS COPY

Khyber Pakhtunkhwa Technical Education & Evaluation Authority Branch

Code _____ Branch Name _____ Date _____

ONLINE DEPOSIT SLIP

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

 <input type="checkbox"/>		 <input type="checkbox"/>		Test Processing Fee: 199/- GST 16%: 32/- Bank Charges (For Transaction Verification): 14/- Total: 245/- GST#: 3277876150963	Amount in Words: Two Hundred and Forty Five Rupees Only. Non Refundable/ Non Transferable NTN#: 5013176-5
A/C Title: Allied Testing Services A/C No: 50127000600355 Note: Bank Service Charges: Free of Cost Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office.		A/C Title: Allied Testing Services A/C No: 00150981013676011 Note: Bank Service Charges: Free of Cost Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office.			
Project Id:	TEVTA-KPK				
Applicant's Name:					
Guardian's Name:					
CNIC No/ B Form No:					
Post Name:					
			Applicant Signature _____	Cashier _____	
			Officer _____		