



Fazaia Inter College PAF Complex E-9, Islamabad

Contact: 051-9507551, 051-9507553

JOB APPLICATION FORM

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POST APPLIED FOR _____

BASIC INFORMATION OF CANDIDATE

Name (Block Letters) _____

Father's Name (Block Letters) _____

CNIC No. _____ Date of Birth _____ Age: _____

Religion _____ Gender: _____ Province: _____ Hafiz e Quran (Yes/No) _____

Marital Status: _____ Any Disability (Yes / No) _____ if yes attached the certificate

Permanent Address: _____

Mailing Address: _____

Contact Number: _____ E-Mail Address: _____

Certificate / Degree Title	Major Subject	Total Marks	Obtained Marks	Percentage	Passing Year	Division /CGPA	Name of Board / University / Degree Awarding Institute
Matric or equivalent							
Intermediate or equivalent							
Bachelor's degree or equivalent							
Master's degree or equivalent							
M. Phil. /MS or equivalent							
Ph.D. or equivalent							

Other							
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PROFESSIONAL EXPERIENCE

Sr. No.	Job Designation	Name of Organization	Duration	
			From	To

DECLARATION: I undertake to abide by the instructions / guidelines available in advertisement and hereby declare that all the information provided is correct to the best of my knowledge. I understand that incorrect information found (if any) would render me ineligible for the post and university reserves the right to reject / cancel my application OR Sue me in a court of Law.

Date: _____

Candidate Signature _____