## SARDAR FATEH MUHAMMAD KHAN BUZDAR INSTITUTE OF CARDIOLOGY DERA GHAZI KHAN

| JOB APPLICATION FORM                              |   |                     | Diary No                                 | Diary No:      |  |
|---|---|---------------------|--|----------------|--|
| Name of The Post-Applying                         | g For:  | •••••               |  |                |  |
|   | s and attach relevant documents to each fo  |                     | plying for more than or                  | ne post)       |  |
|   | es mentioned below (Attach the documenta  |                     |  | • •            |  |
| 1. I am Hafiz-E-Quran                             | Z 2 | ing proof of the of | <b>P</b>                                 |                |  |
| 2. I am Ex-Service Man                            |   |                     |  |                |  |
| 3. I have a position in a Board                   | 1/ University   |                     |  |                |  |
| B. Tick the Relevant Check boxe                   | es mentioned below (Attach the documenta  | nry proof of the o  | ption selected below)                    |                |  |
| <b>1.</b> I am applying for 3% Disal              | oled Quota Seats  |                     |  |                |  |
| 2. I am applying for 5% Mino                      | ority Quota Seats   |                     |  |                |  |
| <b>3.</b> I am applying for 15% Wo                | . 1 1 0 = 1   | H' M                |  |                |  |
| <b>4.</b> I am applying for 20% Hea               | Ith Employees Quota Seats   | A                   | 2  |                |  |
| C. Personal Details                               | *   |                     | P  |                |  |
|   | - 0 0   |                     |  |                |  |
|   |   |                     |  |                |  |
|   | Domicile:   |                     |  |                |  |
|   | Date of Birth (DD-MM-YYYY):   |                     |  |                |  |
|   | Mobile Number of the G  |                     |  |                |  |
| E-MAIL:   | Are you a Punjab Government l   | Employee:           |  |                |  |
| if yes, Name of the institution, Post he          | ld a <mark>n</mark> d type/ nature of post i.e., Regular / Contr  | ract / Adhoc        |  |                |  |
| Were you ever dismissed from govern court of law? | nment service/autonomous body/ invalidated, in  | ivolved/ proceeding | ag <mark>a</mark> inst in a criminal cas | e before any   |  |
| A   |   |                     |  | - 11           |  |
| D. ACADEMIC QUALIFICATI                           |   |                     |  |                |  |
| Certificate<br>/Degree                            | Board/<br>University  | Obtained<br>Marks   | Total Marks Percentage                   | Grade          |  |
| 15  |   |                     |  |                |  |
|   |   |                     |  |                |  |
| 1 2   |   |                     |  |                |  |
|   |   |                     |  |                |  |
|   |   |                     |  |                |  |
|   | FATTOR  | THE                 |  |                |  |
| E. SERVICE RECORD/ EXPER                          | RIENCE  | 1                   |  |                |  |
| Post Held along with scale                        | Department/ Office  | From                | То                                       | Total Duration |  |
|   |   |                     |  | Duration       |  |
|   |   |                     |  |                |  |
|   |   |                     |  |                |  |
|   |   |                     |  |                |  |
|   |   |                     |  |                |  |
|   |   |                     |  |                |  |
|   |   |                     |  |                |  |
| F. DISCLAIMER                                     |   |                     |  |                |  |
| I have attached Picture, CNIC, Do                 |   |                     |  |                |  |
|   | omicile, and all other academic documents<br>ed by me in the above application form is o  |                     |  |                |  |

1. Please mention the name of the post applied on the back side of the Postal/ courier envelope

Date: .....

2. Please send the application form and all the relevant documents as mentioned in the advertisement to the Following Address:

OFFICE OF THE MEDICAL SUPERINTENDENT, SARDAR FATEH MUHAMMAD KHAN BUZDAR INSTITUTE OF CARDIOLOGY, DERA GHAZI

Candidate's Signature.....