	LineManager:											
		Offical Email: Type: Department:										
Personal Inform Father/Husband Related Gender: Mobile: Emergency Contact N CNIC: Current Address: Personal Email:		Name of Father/Husband: Marital Status :					Date of Birth :					
Academic Qual	ification											
Institute Name	Degree	Degree & Majors				Passing Year				CGPA		
Certifications Institute Name		Degree	& Majors				Passin	g Year			CGPA	
Previous Job In	formation											
Company Name		Des	Designation			Joining	Joining Date			End Date		
Employee Tran	sfer Informati	on										
EmployeeCode EmployeeName		Departmen	nt Desig	nation	ion LineManager		ReportTo Email Con		Compar	nyName	TransferDate	!
Employee Pron EmployeeID Employ Job Information Probation Period: Status:	eeName Departmen	t Designation	Basic Salary		owance	Transport A	llowance	Medical Allows	ance Fue	el Allowance	Effective Date	Tax
Payroll Informa Basic Salary: Transport Allowance		Food Allowance :				Medical Allowance :						
Bank Account I	nformation	From Bank :			То	Bank :			Acco	ount#:		

From Branch:

Account Title #:

Report To

To Branch: