Registration No. _____
Filled by NTS

NTS

REGISTRATION FORM

National Aptitude Test

NAT 2014-I

Picture 1
Paste your recent passport size color photograph with gum

Provide Only 2 recent photograph
both are pasted in photograph column

*. Authentication Keyword ☐☐☐☐

A keyword (only 4 Digits) provided by the candidate to submit correction query later for correction in provisional candidate list on the NTS website

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*Note: Application Form will not be entertained without Original Deposit Slip (NTS Copy)

1. Bank Online Deposit of Rs: 650/- from Designated Bank Branches.

Bank Name & Code		Deposit Date	

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2. Desired Test City Fill Only One Box for Desired Test City **(Mandatory)**

(Subject to a minimum of 200 candidates, other wise the candidates will be assigned next nearest test city)

1. ☐ Bahawalpur	4. ☐ Hyderabad	7. ☐ Lahore	10. ☐ Quetta
2. ☐ Faisalabad	5. ☐ Islamabad / Rawalpindi	8. ☐ Multan	11. ☐ Rahim Yar Khan
3. ☐ Gujrat	6. ☐ Karachi	9. ☐ Peshawar	12. ☐ Sukkur

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3. Test Type Fill Only One Box for Desired Test Type. For details, see instructions given on *Page:2* **(Mandatory)**

A) TEST TYPE FOR CANDIDATES HAVING 12 YEARS EDUCATION:

☐ NAT-IE (Pre Engineering)	☐ NAT-IM (Pre Medical)	☐ NAT-IA (Arts / Humanities)
☐ NAT-ICS (Computer Science)	☐ NAT-IGS (General Science)	☐ NAT-ICOM (Commerce)

B) TEST TYPE FOR CANDIDATES HAVING 14 YEARS EDUCATION:

☐ NAT-IIA (Arts & Social Science)	☐ NAT-IIM (Management Science)	☐ NAT-IIO (Oriental & Islamic Studies)
☐ NAT-IIB (Biological Science)	☐ NAT-IIP (Physical Science)	

Personal Information: Use CAPITAL letters and leave spaces between words.

4. Name in Full: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

5. Father's Name: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

6. Candidate CNIC# or B.Form#: ☐☐☐☐☐ — ☐☐☐☐☐☐☐ — ☐   **7. Gender:** ☐ Male ☐ Female

Mandatory (write your own CNIC or B.Form Number also attached the photocopy of your CNIC. Other wise you are not Eligible)

8. Date of Birth:
Write your Correct Date of Birth other wise you will be rejected
D D M M Y Y Y Y
☐☐ – ☐☐ – **1 9** ☐☐

9. Email: _____

10. Postal Address: _____
(All correspondence will be made on this address)

City: _____ Postal City District: _____

11. Phone No: **(OFF)** _____ **(RES.)** _____ **(Mobile)** _____
(City Code - Phone No)