

Recruitment Test to be Conducted by OTS**Federal Government Agency****Applied For: Assistant Sub Inspector (BS-09)****Personal Information:**

Name: Muhammad Waseem Father Name: Ulfat Hussain
CNIC/Passport: 35501-0325958-9 Date of Birth: 31-08-1995
Address: Qila Roop Singh Post Office Bucheki Tehsil & District Nankana Sahib
City: Bucheki District: Nankana Sahib
Mobile: 0301-7161638 Gender: Male
Domicile: Nankana Sahib Province: Punjab
Disability: No Height: 5.70
Chest: 34.00
Armed Forces: No Govt Employee: No

**Academic Information:**

Certificate / Degree Name	Major Subjects	Year of Passing	Obtained Marks / CGPA	Total Marks	Percentage	Division or Grade
BS IT	Database M...	2019	3.60	4.00	90.00	1st Division
F.Sc Pre Engineering	Mathematic...	2015	856.00	1100.00	77.81	1st Division
Matric Science	Mathematic...	2012	727.00	1050.00	69.23	1st Division

Employment Record:

S.No.	Organization / Employer Name	Job Title	From	To
1				

Undertaking by Applicant:

- I Muhammad Waseem d/s/w Ulfat Hussain hereby solemnly affirm that I have read and understood the conditions for applying for Assistant Sub Inspector (BS-09) and I have filled the form as per instructions and in the event any information contained herein is found to be untrue, I shall be liable to disciplinary action which may result in cancellation of my Application Form.

Signature & Date : _____ . Thumb Impression (Left Hand): _____ .

Instructions:

- By Hand submission of Application Form is not allowed.
- Without Original Bank deposit Slip your application form will not be entertained.
- Without Applicant Signature & Thumb Impression Application Form will not be entertained.
- Test fee is non-refundable & non-transferable.
- Mobile Phones are not allowed in Test Center premises.
- Use separate envelop and separate application form for each post you apply. However, registration form for more than one posts may be sent in one envelop.
- Application should reach OTS office latest by last date of submission of Application Form.
- Do not send any additional documents with this application.
- OTS will not be responsible for late receiving of application through courier / Pakistan Post etc.
- You can also download your Roll number slip online from www.ots.org.pk, in case of non-delivery via courier.

Please Send Application Forms to:

Manager Operations (FGA)
Office # 01, Central Avenue, Bahria Town, Phase VI, Islamabad
Help Line: 051-111 687 222 Fax: 051-5732751
Website: <http://ots.org.pk>
Email: info@ots.org.pk

Open Testing Service

Innovation in Training & Assessment


OTS Copy


Branch Code: _____ Date: ____/____/____


Branch Name: _____

ONLINE DEPOSIT SLIP

Please deposit in only one bank & tick the relevant Bank

	<input type="checkbox"/> Habib Bank Limited
Remote Branch:	Habib Bank Limited, PWD Branch (2328)
Account Title:	Open Testing Service
Account Number:	23287106336103
Amount in Figures:	Rs. 150
Amount in Words:	One Hundred Fifty Only
Note: Bank Service Charges Free of Cost	

	<input type="checkbox"/> Bank Alfalah Limited
Remote Branch:	Bank Alfalah, PWD Branch (0335)
Account Title:	Open Testing Service
Account Number:	0335001004927667
Amount in Figures:	Rs. 150
Amount in Words:	One Hundred Fifty Only
Note: Bank Service Charges Free of Cost	

	<input type="checkbox"/> Allied Bank Limited
Remote Branch:	ABL Islamic Banking, PWD Branch (5133)
Account Title:	Open Testing Service
Account Number:	0020050208060021
Amount in Figures:	Rs. 165
Amount in Words:	One Hundred Sixty-five Only
Note: Inclusive of Bank Service Charges	

- The Bank Must Return OTS Copy to the Candidate.
- Attach CNIC Copy with deposit slip.
- Application Form will not be entertained without Original Deposit Slip.
- Application Form will not be entertained other than against cash payment.
- FBP Endorsement is required on both the Deposit Slip.
- Deposit it in any online country wide branches.
- Cash should always be deposited at the respective counter and electronic computer generated receipt printed through flatbed printer on deposit slip/challan should be obtained before leaving the counter, please be sure to check the receipt and satisfy that complete details including account number and amount deposited are correctly printed failing which the bank will not be responsible.

Applicant Name:	Muhammad Waseem
Applicant Father Name:	Ulfat Hussain
CNIC No. / Form B No.:	35501-0325958-9
Applied For:	Assistant Sub Inspector (BS-09)

Applicant Signature

Cashier

Open Testing Service

Innovation in Training & Assessment


BANK Copy

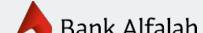
Branch Code: _____ Date: ____/____/____


Branch Name: _____

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