

Job Application Form Preview

Personal Information

Full Name	q
CNIC	f
Sex	Male
Date of Birth	12/12/2009 12:00:00 AM
Email	mawaiskhan1002@gmail.com
Mobile	12345678
WhatsApp	12345678
Telephone (Res.)	12345678
Post Applied	Professor (BPS-21)
Department	q
Campus	Main Campus
Father's Name	q
Present Address	q
Permanent Address	q
Quota	q
Domicile	sgsg
Nationality (Self)	fgjfgghj
Nationality (Spouse)	sdfsd

Education - Secondary/Intermediate

Certificate/Degree	Institute	Reg. No	Years	Division/CG PA	Marks Obtained	Total Marks	Subject
q	qq	q	q	q	q	q	q

Education - University

Certificate/Degree	Institute	Reg. No	Years	Division/CG PA	Marks Obtained	Total Marks	Subject
q	q	q	q		q	q	q

Education - PostDoc

Certificate/Degree	Institute	Reg. No	Years	Division/CG PA	Marks Obtained	Total Marks	Subject
q	q		q		q	q	

Research Work

Title	Period	Professor	Institution
q	2020-12-27 to 2025-09-26	q	q

Employment History

Post Held	Where Employed	Scale of Pay	Last Pay	From	To	Y	M	D	Cause of Leaving	Job Description
q	q	q	q	2023-01-30	2024-11-14	1	9	15	q	q

Countries Visited

Country	From	To	Purpose
q	2025-09-01	2025-09-26	q

Bank Credit Slip

Amount	Slip No	Date	Bank / Branch	File
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Declarations

All Qualifications Met?	No
Minimum Pay Acceptable	123456
Physical Disability	Yes
Disability File	
Financial Liability	asdd
Employer Permission	Yes
Confidential Record Authority	asdfgh
Time to Join	asdfg
Attached Documents	sdfg
Certification Signed?	No