|  |  |  |  |
| --- | --- | --- | --- |
| **EPI Technician Form**  ***Note:*** *Fields marked with asterisk(\*) are mandatory* | | | |
|  | | | |
| **1.** **Province** *\****:** | | **6. Technician Name** *\****:** | |
| **2.** **District** *\****:** | | **7. Father Name** *\****:** | |
| **3. Tehsil** *\****:** | |  | |
| **4*.*****Union Council:** | |
| **5*.* Name of (health/EPI) facility** *\****:** | |
| Basic Information | | | |
| **8. Marital Status:**  ***Mark only ONE box***  **Married**  **Single** | | **12. Phone Number** *\****:** | |
| **9. CNIC #** *\****:** | | **13. Date of Birth** *\****:** | |
| **10. Supervisor Name** *\****:** | | **14. Employee Type :**  *Mark only ONE box*  Contract  Regular  Contingent | |
| **11. Catchment Area Population** *\****:** | | | |
| Address and Qualification | | | |
| **15. Permanent Address** *\****:** | | **18. Present Address** *\****:** | |
| **16. Last Qualification :** | | **19. Passing Out Year :** | |
| **17. Institute Name :** | | **20. Catchment Area Name :** | |
| Joining Details | | | |
| **21. Date of Joining :** | | **24. Place of Joining :** | |
| **22. Status***\**  ***Mark only ONE box***  **Active**  **Terminated**  **Transferred**  **Died**  **Retired** | | **25. Area Type**  ***Mark only ONE box***  **Rural**  **Urban**  **Slum**  **Semi Urban** | |
| **22 (a).** *If Terminated/Transferred/Died/Retired*, **Mention Date:** | | | |
| **23.** *If Transferred/Terminated,* **Reason:** | | | |
| Training Information | | | |
| **Training** | **Start Date** | | **End Date** |
| **26. Basic Training :** |  | |  |
| **27. Routine EPI :** |  | |  |
| **28. Surveillance :** |  | |  |
| **29. Cold Chain :** |  | |  |
| **30. vLMIS/EPI-MIS :** |  | |  |

|  |  |
| --- | --- |
| Banking Details | |
| **31. Bank Information** *\****:** | **34. Branch Code :** |
| **32. Branch Name :** | **35. Bank Account Number** *\****:** |
| **33. Basic Pay Scale** *\****:** | **36. Basic Pay :** |