

# REGISTRATION FORM

**Registration No.**

Filled by NTS

# Directorate of Staff Development

# Recruitment Test For The Post of District Teacher Educators (DTEs)

**Picture 1**  
**Paste your**  
**recent**  
**passport size**  
**color photograph**  
**with gum**

**Provide Only 2 recent photograph  
both are pasted in photograph column**

### Eligibility Criteria:

A. Is your **Age is below 40 Years** at the date of **31-10-2011**? ☐ **Yes** ☐ **No**

**1. Bank Online Deposit of Rs: 600/- from Designated Bank Branches.**

Bank Name & Code	Deposit Date
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**\*Note: Application Form will not be entertained without Original Deposit Slip (NTS Copy)**

## 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

<input type="checkbox"/> Attock	<input type="checkbox"/> Hafizabad	<input type="checkbox"/> Mianwali	<input type="checkbox"/> Rajanpur
<input type="checkbox"/> Bahawalpur	<input type="checkbox"/> Jhelum	<input type="checkbox"/> Multan	<input type="checkbox"/> Rawalpindi
<input type="checkbox"/> Bhakkar	<input type="checkbox"/> Kasur	<input type="checkbox"/> Muzaffargarh	<input type="checkbox"/> Sahiwal
<input type="checkbox"/> Chakwal	<input type="checkbox"/> Khushab	<input type="checkbox"/> Nankana Sahib	<input type="checkbox"/> Sargodha
<input type="checkbox"/> Chiniot	<input type="checkbox"/> Lahore	<input type="checkbox"/> Narowal	<input type="checkbox"/> Sheikhpura
<input type="checkbox"/> Dera Ghazi Khan	<input type="checkbox"/> Layyah	<input type="checkbox"/> Okara	<input type="checkbox"/> Sialkot
<input type="checkbox"/> Faisalabad	<input type="checkbox"/> Lodhran	<input type="checkbox"/> Pakpattan	<input type="checkbox"/> Toba Tek Singh
<input type="checkbox"/> Gujranwala	<input type="checkbox"/> Mandi Bahauddin	<input type="checkbox"/> Rahim Yar Khan	<input type="checkbox"/> Vehari
<input type="checkbox"/> Gujrat			

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

[illegible][illegible][illegible]

4. Gender: ☐ Male ☐ Female

**5. Date of Birth:** D D - M M - Y Y Y Y  
Write your Correct Date of Birth  
other wise you will be rejected

**6. Email:** \_\_\_\_\_

**7. Postal Address:** \_\_\_\_\_  
(All correspondence will be made on this address though courier service or ordinary postal service)

**City:** \_\_\_\_\_ **Postal City District:** \_\_\_\_\_

**8. Phone No: (OFF) \_\_\_\_\_ (RES.) \_\_\_\_\_ (Mobile) \_\_\_\_\_**  
(City Code - Phone No)

4. Academic Information: Clearly mention the required Degree Title & Major Subject.  
Note: NTS will not issue Roll No Slips to those who have not given their academic record accordingly .

Certificate / Degree Level	Degree Title	Major Subject	Year Passing	Obtained Marks/CGPA	Total Marks/CGPA	Institute/Board
SSC (10 Years)						
HSSC (12 Years)						
Bachelor (14 Years)						
Master (16 Years)						
Other						

5. Employment Record: (provide complete information)

Sr #	Institute/ Employee Name	Job Title	Total Duration For this Job In Year

Total Job Experience:

Days

-

Months

-

Years

6. Training Attended: (If any)

Sr #	Training

## Undertaking By The Applicant:

I \_\_\_\_\_ d/s/w of \_\_\_\_\_ do hereby solemnly affirm that I have read and understood the conditions for appearing in the NTS Test and that I have filled the form as per instructions given above 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 test.

Date: \_\_\_\_\_

Signature of the Candidate \_\_\_\_\_

**Picture 2**  
**Affix your recent**  
**passport size**  
**color**  
**photograph**  
**with Stapler**

Provide 2 recent photograph  
both are pasted in photograph column

- **Attach your recent Photograph, CNIC copy and Original Bank Deposit Slip NTS Copy**
- **By Hand submission of Application Form is not allowed.**
- **Mobile Phones are not allowed in Test Center premises.**
- **Please visit NTS Website according to the TEST Schedule to check your status.**

### Help line:

**Phone No.** ISB: 051-9258478-79  
LHR: 042-99239258  
KHI: 021-35215013  
PES: 091-9218233  
**Website:** [www.nts.org.pk](http://www.nts.org.pk)  
**E-mail** [info@nts.org.pk](mailto:info@nts.org.pk)

### Send Application Forms to:

**Manager Operations**  
**National Testing Service**  
**402, Street No. 34, Sector I-8/2,**  
**Islamabad.**



# National Testing Service

Building Standards in Educational and Professional Testing


**NTS COPY**


Branch Code: \_\_\_\_\_ Date: \_\_\_\_\_


Branch Name: \_\_\_\_\_


## ONLINE DEPOSIT SLIP

(\* Please deposit fee in only one bank & tick the relevant bank)

 <b>Allied Bank Limited</b> <small>(Formerly: Allied Bank of Pakistan Limited)</small>	<input type="checkbox"/>
Remote Branch: <b>I-8 Markaz Branch Islamabad (0947)</b>	
A/C Title: <b>NTS-Collection</b>	A/C No. <b>01-167-0006-4</b>
Note: Bank Service Charges <b>Free of Cost</b>	

 <b>Muslim Commercial Bank</b>	<input type="checkbox"/>
Remote Branch: <b>I-8 Markaz Branch, Islamabad (1501)</b>	
A/C Title: <b>NTS-Collection</b>	A/C No. <b>0041749181000999</b>
Note: Bank Service Charges <b>Free of Cost</b>	

 <b>UNITED BANK LTD.</b>	<input type="checkbox"/>
Remote Branch: <b>Cantt Br Rawalpindi (0041)</b>	
A/C Title: <b>NTS-Collection</b>	A/C No. <b>011-2530-9</b>
Note: Bank Service Charges <b>Free of Cost</b>	

 <b>HABIB BANK LTD</b> <small>THE POWER TO LEAD</small>	<input type="checkbox"/>
Remote Branch: <b>H9 Shalimar Recording Co ISB (1742)</b>	
A/C Title: <b>NTS-Collection</b>	A/C No. <b>1742-79002786-03</b>
Note: Bank Service Charges <b>Free of Cost</b>	

**\*Note:** Desired Bank Stamp is required on the Deposit Slip & Send Original Deposit Slip (NTS Copy) along Application Form to NTS Office

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

<b>Applicant's Name:</b>	
<b>Father Name:</b>	
<b>CNIC No/ B Form No:</b>	
Amount Rs: <b>600/-</b>	Amount in word: Rs. <b>Six Hundred Rupees Only.</b> <b>Non Refundable/ Non Transferable</b>

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Cashier  
**DSD 2011**

\_\_\_\_\_  
Officer



# National Testing Service

Building Standards in Educational and Professional Testing


**BANK COPY**


Branch Code: \_\_\_\_\_ Date: \_\_\_\_\_


Branch Name: \_\_\_\_\_


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Cashier  
**DSD 2011**

\_\_\_\_\_  
Officer