

## APPLICATION FORM

Ministry of Finance, Revenue, Economics Affairs, (Economics Affairs Division), Government of Pakistan

TAG # (For Official use)

(287)

Applying for: Duplicating Machine Operator (DMO) (BPS-04)

| Note: Send this Application Form on the Address Mentioned Below  Note: ALL DATA FIELDS ARE REQUIRED. FILL YOUR |              |  |                 |                              |                              |  |                               | Passport size Recent<br>Photograph Affix with<br>Gum (Latest By 6<br>months)<br>آپ کی تصویر اس خانے |                    |  |
|--|--------------|--|-----------------|------------------------------|------------------------------|--|-------------------------------|---|--------------------|--|
| APPLICATION FORM CAREFOLLY.  |              |  |                 |                              |                              |  |                               | پر اس کانے<br>روری ہے   | · ·                |  |
| Domicile   | ☐ Punjab     |  |                 | Sindh (U)                    |                              | lh (R)   |                               | ے جہ نے کہا ہے۔   |                    |  |
| /  | □ KPK        | ☐ Islamaba                               | d Capital Te    |                              | ☐ FAT                        | A  |                               |   |                    |  |
| (Tick only one)  | ☐ Azad Ja    | ammu and Kashmir Gilgit Baltistan Gother |                 |                              |                              |  |                               |   |                    |  |
| 1. Personal Information (In Block Letters)   |              |  |                 |                              |                              |  |                               |   |                    |  |
| Name (in Full):  Note: Tick Only One Circle in each Row.   |              |  |                 |                              |                              |  |                               |   |                    |  |
| Father's Name:   |              |  | Religion:       | Religion: Muslim Non-Muslim  |                              |  |                               |   |                    |  |
| CNIC/B-Form:   | /B-Form:     |  |                 |                              |                              |  | Are You Disable?              |   |                    |  |
| •  |              |  |                 |                              |                              | Gender:  | Gender:                       |   |                    |  |
| Age:   | _ Date o     | f Birth (D-M-Y) Marital Status:          |                 |                              |                              |  | Armed Forces: Yes No          |   |                    |  |
| Postal Address:  |              |  |                 |                              |                              | personnel of Armed Forces of Pakistan  Servant: Yes No |                               |   |                    |  |
|  |              |  |                 |                              |                              |  | Servant wife, son or daughter |   |                    |  |
| Government Se  |              |  |                 |                              |                              | ent Se   | rvant:                        | Yes \ \ \ \ No  |                    |  |
| Phone #: Cell #: (Do not give here Network   |              |  |                 |                              |                              | d Ca at  | /D., alalla : a.t             | Vaa ONa   |                    |  |
|  |              |  |                 | converted                    | l mobile Numbers             | Schedule   | a Cast                        | /Buddhist: (  | Yes \ \ \ \ No     |  |
| 2. Academic Information (Note: In case of incomplete academic information, Your Application will be Declined.) |              |  |                 |                              |                              |  |                               |   |                    |  |
|  |              | Degree Title                             | Major Subjects  |                              | ion, Your Applica<br>Year of |  |                               |   | Institution        |  |
| Certificate/Degree   |              | Degree Title                             | Major 3         | шыессь                       |                              |  | Marks                         | Percentage  | Name               |  |
| SSC (10 years)   |              |  |                 |                              |                              |  |                               |   |                    |  |
| HSSC / DAE / A-Level (12 / 13 years)   |              |  |                 |                              |                              |  |                               |   |                    |  |
| Bachelor (14 years)  |              |  |                 |                              |                              |  |                               |   |                    |  |
| Bachelor(Hons)/Master (16 years)   |              |  |                 |                              |                              |  |                               |   |                    |  |
| MS / M.Phil. (18 years)  |              |  |                 |                              |                              |  |                               |   |                    |  |
| PhD  |              |  |                 |                              |                              |  |                               |   |                    |  |
| Other (Diploma / C   | 'ertificate) |  |                 |                              |                              |  |                               |   |                    |  |
| 3. Employme  | ent Inforr   | nation (If Applicable ) (                | Note: If you ne | ed more row                  | s to write your inf          | formation, you c                                       | an add                        | an additional page  | e with Application |  |
| Organization Type  |              | Organization Name                        |                 | Designation                  |                              | Job Description  | on                            | Start Date  | End Date           |  |
| (Government / Semi Government  |              | (Name of the Organization / Dept.)       |                 | (Your Designation / Position |                              |  |                               | (Starting Date)   | (End Date)         |  |
| / Private)   |              |  |                 |                              | Title)                       |  |                               |   |                    |  |
|  |              |  |                 |                              |                              |  |                               |   |                    |  |
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| 4. Undertaking by Applicant   |
|---|
| Id/s/w ofdo hereby solemnly affirm that I have read and understood the conditions for applying in the above mentioned Post 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 candidature at any stage. |
| Signature & Date: Thumb Impression (Left Hand):   |
| Document Check list:  |
| Tick if Attached / selected:  |
| □ Photograph is Attached  |
| □ CNIC Copy is Attached on the back side of Application Form  |
| <u>Instructions:</u>  |
| ALL DATA FIELDS ARE REQUIRED TO BE FILLED. FILL YOUR APPLICATION FORM CAREFULLY.  |
| In case of more than one apply use separate application form.   |
| <ul> <li>Application must reach OTS office latest by last date of submission of application form.</li> <li>OTS will not be responsible for late receiving of application through courier / Pakistan post etc</li> </ul>   |
| <ul> <li>OTS will not be responsible for late receiving of application through courier / Pakistan post etc</li> <li>Attach your recent photograph (Latest by 6 Months), CNIC copy with this application form.</li> </ul>  |
| <ul> <li>Without Signature &amp; Thumb impression, your application form will not be entertained.</li> </ul>  |
| Without photograph your application form will not be entertained.   |
| <ul> <li>In-complete forms will not be entertained. (All the fields are mandatory / Required)</li> </ul>  |
| In Person/By hand submission of Application form is not allowed.  M. Liberton and Application form is not allowed.  |
| <ul> <li>Mobile phones or other electronic gadgets are not allowed in test center premises.</li> </ul>  |
| Cut Address box given below and affix it with gum on the envelope.  |
| ×   |
| Send Registration Form to:  |
|   |
| Section Officer (Admin-II) Economic Affairs Division Room No 335 Block-C  |
| Pak Secretariat Islamabad   |
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