APPLICANT INFORMATION FORM

PERSONAL INFORMATION	Test Location _____	Computer No (For Office use only)

Name: _____ Father's Name_____

Date of birth: dd/mm/yy | | | | | | | CNIC NO. | | | | | | | | | | | | | | |

Religion (Muslim, Hindu, Christian, Ahmadi or others): _____ Gender _____

Marital status: _____ Nationality: _____ Domicile: _____

Postal Address: _____

Permanent Address: _____

Phone :(with area code) _____ Mobile:_____

Email Address _____

Photograph

QUALIFICATION:

S. No	Qualification	Major Field /subjects	Board	From (year)	To (year)	Marks obtained	Total Marks	Roll No	Grade	%

Declaration: By signing below, I acknowledge that the above information is true to the best of my knowledge. Any misinformation would render me ineligible for the induction.

Date: _____ Signature of Candidate: _____ Signature of Parents/ Guardian: _____