

**EMPLOYMENT APPLICATION FORM**  
(Non-Academic)

Affix your passport  
size photograph  
(With white  
background)

**Note:**

- I. The application form should be duly filled and signed by the applicant.
- II. Incomplete application will not be entertained.
- III. The information provided will be kept confidential.

Post applied for			Department	
NAME (in block letters)				
Father's name				
Address: for correspondence				
Contact no.		Email ID		
Date of birth (DD.MM.YYYY)	CNIC no			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
You are seeking	<input type="checkbox"/> Full time	<input type="checkbox"/> Part time	<input type="checkbox"/> Temporary	
Current salary				
Expected salary				

For office use only	
<b>Board decision</b>	
	Date: _____
Approved salary	
Designation	
Department	
COO _____	HoD _____
HR Head _____	Deputy Chairman BoG _____
Chairman BoG _____	

Give particulars of all examinations passed and degrees/technical qualifications obtained, commence with reverse chronological order.

Sr.	University, college or board	Years attended		Degree/Certificate	Maximum marks	Obtained marks	Division/Grade
		From	To				

Professional trainings/certifications/others, (If any)

Sr.	Institute name	Type of training	Duration		Degree/Certification/ Diploma obtained
			From	To	

Employment record/professional experience (In reverse chronological order please).

Sr.	Organization name	Position held	Contact no.	Duration		Salary	Reason of leaving
				From	To		

Please mention referral or blood relation/close relative already working in University.

Sr.	Reference name	Designation	Department

**Declaration**

It is hereby certified that all information given in this application form is accurate and to the best of my knowledge, nothing relevant has been concealed. I understand that if I am hired, this application will become a part of my official employment record. I understand that any statements on this form which prove to be untrue or purposely misleading will render the application void.

Furthermore if discrepancies are highlighted at a later stage University retains the right to withdraw any offer made or dismissal at any time without any notice. I authorize the University to contact educational institutions, previous employers and others to verify the accuracy of the information contained in this application. I hereby release the university from any liability as a result of such contact.

I have read, understood and by my signature, agreed with these statements.

Applicant signature \_\_\_\_\_

Date \_\_\_\_\_