



Sr. No: _____
(For Office Use Only)

WOMEN UNIVERSITY, SWABI

URL: www.wus.edu.pk

JOB APPLICATION FORM FOR NON-TEACHING POSITIONS **(BPS 17 & ABOVE)**

Paste 03 recent
passport
size pictures

Advertisement No: _____

Post Applied for: _____

I. Personal Information		
1. Name (Block Letters):	2. Father's Name (Block Letters):	3. CNIC Number:
4. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	5. Domicile:	6. Place of Birth:
7. Permanent Address:		8. Present/Mailing Address:
9. Date of Birth (day/month/year):	10. Nationality:	11. Religion:
12. Phone (a) Residential (b) Official		13. Mobile Number:
14. E-mail address:		15. Marital Status:

II. Academic Qualification								
S#	DEGREE/ CERTIFICATE	Major/ Subjects	Board/ University	Year of Passing	Total Marks	Obtained Marks	Division/ Grade	Percentage
1.	Matriculation							
2.	Intermediate							
3.	Bachelors (14 years educ.)							
4.	Masters/ BS (16 years educ.)							
5.	M.Phil./MS							
6.	PhD							
7.	Post Doctorate							
8.	Any Other							

III. Distinction (Awards/ Medals/Certificates with detail)

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IV. Professional Qualification/Training/Certificates/Others;

S#	Title of Training/ Course	Diploma/ Certificate	Field of Study	Institution	Grade / Division
1					
2					
3					

**Attach additional sheet if required*

V. Employment Record (Start from current position)

S#	Name of Institute/Organization	Designation	BPS	Nature of Job (Permanent/Temporary/Contract/Fixed Pay)	Job Description	Duration Time		
						Dates		Period
						From	To	YY-MM-DD
1								- -
2								- -
3								- -
4								- -
5								- -
6								- -
7								- -
Total*						Years:	Months:	Days:

**Total Experience till closing date of application. Attach additional sheet if required*

VI. References (Academic/Professional)

Reference-1	Reference-2

VII- Bank Draft / Receipt No.:_____ (Please attach in original)

Amount in PKR: _____

Date: _____

Declaration:

It is hereby certified that information given in this application form is correct and nothing relevant has been concealed.

Date: ____/____/____

Signature of Applicant

VIII- Check-List of testimonials attached:

- | | |
|--|--------------------------|
| 1. N.I.C | <input type="checkbox"/> |
| 2. SSC (DMC/Transcript + Certificate) | <input type="checkbox"/> |
| 3. FA/F.Sc (DMC/Transcript +Certificate) | <input type="checkbox"/> |
| 4. BA/BSc (DMC/Transcript + Degree) | <input type="checkbox"/> |
| 5. MS/MSc/BS (Transcript +Degree) | <input type="checkbox"/> |
| 6. M.Phil/MS (Transcript +Degree) | <input type="checkbox"/> |
| 7. PhD (Transcript + Degree) | <input type="checkbox"/> |
| 8. List of Publications/ Research Papers | <input type="checkbox"/> |
| 9. Experience Certificate(s) | <input type="checkbox"/> |
| 10. NOC (for In-service candidate) | <input type="checkbox"/> |
| 11. Other documents: | |
| _____ | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> |

Please Send Application Form to:

**Registrar
Women University, Swabi
Main Campus Kotha.
Phone No. 0938-281889**