Form No



Bank Challan No:	
Date:	

Application Form for non-teaching positions

Women University of Azad Jammu & Kashmir, Bagh

Applied For:	Nan	ne of Post			BPS			
		(Note: Pla	ease fill the information	on in both sides of	the page)			
Personal Info	ormati			·	1 0 /			
		Urdu:						
Name:		English:						hoto
		Urdu:					- r	11010
Father's Name:		English:						
Gender (Male / Fer	male)	Date of Birth				Religion		
	muic)		(DD-MM-YYYY) Refugee	dmn		Domicile		
Marital Status		10	(Yes/No)		1	Donnene		
Disability (Yes/No (In case of yes, please spec	ify type	(9)	Type of Disability					
in next column and attach certificate)		0			7			
D A dd	/	5/				20		
Present Address:	1			100	1	5	V.	
- /			200 324		- 3	17	1	
Permanent Address	s:	-		100		1 =	1	
E-mail:	2	10000		Phone No.	100			
				-	100	00		
CNIC#:	-					J		-
Certificate / Degree Held		d (Attach attest	ed Photocopies. Pleas Inst	e start from high titution/Board/Ur		cation in o		g order) rade/Div.
Certificate /	Pas	sing Year		titution/Board/Ur	niversity	cation in o		
Certificate / Degree Held	Pas	ce (Please star	Inst	titution/Board/Ur	niversity	cation in o		
Certificate / Degree Held	Pas	sing Year	rt from most recent job	titution/Board/Ur	der)	From	G	rade/Div.
Certificate / Degree Held Professional E	Pas	ce (Please star	rt from most recent job	o in descending or	der)		Period	rade/Div.
Certificate / Degree Held Professional E	Pas	ce (Please star	rt from most recent job	o in descending or	der)		Period	rade/Div.
Certificate / Degree Held Professional E	Pas	ce (Please star	rt from most recent job	o in descending or	der)		Period	rade/Div.
Certificate / Degree Held Professional E	Pas	ce (Please star	rt from most recent job	o in descending or	der)		Period	rade/Div.
Certificate / Degree Held Professional E	Pas	ce (Please star	rt from most recent job	o in descending or	der)		Period	rade/Div.
Certificate / Degree Held Professional E	Pas	ce (Please star	rt from most recent job	o in descending or	der)		Period	rade/Div.
Certificate / Degree Held Professional E Appointment	xperien	ce (Please star Name of Organization	rt from most recent job	o in descending or	der)		Period	rade/Div.
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Certificate / Degree Held Professional E Appointment Address Slip (To be me of Applicant:	xperien (ce (Please star Name of Organization	t from most recent job Job	o in descending ord Profile Name of Applica	der)	From	Period	Total years
Certificate / Degree Held Professional E Appointment Appointment Appointment Appointment Appointment Appointment Appointment Appointment	xperien (ce (Please star Name of Organization by candidate)	t from most recent job Job	o in descending ord	der)	From	Period	Total years
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Certificate / Degree Held Professional E Appointment Appointment Appointment Appointment Appointment Appointment Appointment Appointment	xperien (ce (Please star Name of Organization by candidate)	Inst t from most recent job Job	Profile Name of Applica Father's Name:	der)	From	Period	Total years

5) Certified from the employer (For Government	ent Employees Only):
Certified that Mr./Ms	is allowed/permitted to apply for the post of selection in Women University of AJ&K, he/she will be relieved in order to
and in case of his enable him/her to join Women University of Azar	
Name of Govt. Department	
Name of Govt. Department	
Name of Head of Department:	Signature:
Date:	Official Seal:
University of AJ&K Bagh. 2. Candidates applying for more than one post shall submit 3. Candidates who have already applied for the regular position response to the earlier advertisement published in variance of the application form can be downloaded from the University Rs. 1000 for BPS-16 and Rs. 500 for BPS-11 to 08330010023466800335 at Allied Bank and attach the of the service candidates must apply through proper channel in service candidates must apply through proper channel in service candidates must apply through proper channel in the University reserves the right of cancellation of adversity reserves the right of cancellation reserves res	ent/University employees. I by due date otherwise their applications will not be entertained. Application received after due date/incomplete will not be entertained.
Application received by	Dated:
Application received by: Checked by:	Dated:
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Short Listed Non Short Listed	If not, reason (s)
Signature & Name of Dealing Officer	Dated:
Signature & Name of Head of Department	Dated:
Signatures of Scrutiny Committee:	ag /
Chairman:	Date:
Member:	Date
Member:	Date
Secretary:	Date

For any information: 05823-960034& 39, Website: www.wub.edu.pk