

APPLICATION FORM

Photograph

Application for the Post of: _____

1	Name		2	Father's Name	
3	Date of Birth		4	Domicile	
5	CNIC Number		6	Contact Number	
7	Religion				
8	Postal Address				
9	Permanent Address				
10	Detail of Family Members Already Working in PAEC	Name	Designation	Relationship	Project / Centre
11	Qualification				
	Degree/Certificate	Passing Year	Marks Obtained / Out of	Div / Grade	Board / University
12	Experience				
	Name of Organization	Period			Nature of Job / Designation
		From	To	Total	
I solemnly undertake that all information / particulars given above are correct to the best of my knowledge and I have not concealed any information.					
Dated		Signature of Applicant			