



University of Narowal

Shakargarh Road Narowal, Contact No: 0542-920049

Website: www.uon.edu.pk

For Office Use

only

Application No:

JOB APPLICATION FORM

Establishment of Institute of Sports

(Contract Basis)

- To be filled & submitted by the candidate. Incomplete/late submitted form shall be rejected.
- Please submit No. of copies of application and all the documents as mentioned in the advertisement.
- Extra pages may be attached (if required).

Advertisement Ref. No. _____ Last Date _____

Payment of processing fee (as per advertisement):
Please attach original deposit Slip at back side of this page.

Demand Draft/Pay Order:

Bank Name: _____ Sr. No. _____

Date: _____ Amount Deposited: _____ Rs. _____

Name of the Post applied for: _____ **BS:** _____

Do you possess the qualification prescribed for the post applied for? (Yes/No) _____
(as specified in the advertisement)

1. Name of the Candidate _____
(In capital letters)

2. Father's Name _____

3. Spouse's Name: _____
(For married candidates only)

4. Present Address: _____

5. Permanent Address _____

6. E-mail _____ 7. Domicile _____

8. Candidate's Contact No.: _____

9. Emergency Contact No.: _____

10. Date of Birth _____ (as per Matriculation Certificate)

11. Age (on closing date for advertisement) :

| Years | Months | Days |
|-------|--------|------|
| | | |

12. National Identity Card No.

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13. Gender (Male / Female) _____ 14. Religion: _____

Please attach recent
photograph

17. Professional Training (Please start from most recent training)

| Course/ Diploma/ Certificate | Field of Study | Institution | Year |
|---------------------------------|----------------|-------------|------|
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18. Please explain why you would like to join University of Narowal?

19. Any other information

20. References: (Provide two academic/ professional references)

Reference I

Name:.....

Designation:.....

Organization:.....

Address:.....

Contact #:.....

Reference II

Name:.....

Designation:.....

Organization:.....

Address:.....

Contact #:.....

21. If you are an ex-serviceman, please give the dates of your service in Armed Forces (as shown in the Discharge Certificate) from _____ to _____. Also mention rank at the time of release / discharge:_____.

CHECK LIST (Please attach attested copies of the relevant documents)

| | | (Yes / No) |
|----|--|------------|
| a) | i) Matriculation | |
| | ii) Intermediate | |
| | iii) Graduation | |
| | iv) Masters | |
| | v) M.Phil / MS | |
| | vii) PhD | |
| | viii) Any other document | |
| b) | i) Domicile Certificate | |
| | ii) CNIC | |
| | iii) Recent Photographs | |
| | iv) Experience / Service Certificate | |
| | v) Certificate of Distinction | |
| | vi) Certificates of Co-Curricular Activities | |
| | vii) Any other document | |

IS/D/Osolemnly declare that the information given in the form is correct. In case, any part of the given information is found wrong, I shall be liable to disciplinary action and dismissal from service. I fully understand that the facts given above will serve the basis for determination of my eligibility by the University and my candidature so determined by the University will stand provisional until it is verified with the original certificates at the time of test / interview.

Candidate's Signature: _____ Date: _____

University of Narowal

(To be filled by the Candidate)

For Office Use Only
Application No.

Name of the Candidate: _____



Name of post: _____



Received by: _____ Dated: _____



(Name & Signature)



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| Candidate Name: | _____ |
| Postal Address: | _____ |
| | _____ City _____ |
| Contact Nos. | _____ |
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| Candidate Name: | _____ |
| Postal Address: | _____ |
| | _____ City _____ |
| Contact Nos. | _____ |
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| Postal Address: | _____ |
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| Contact Nos. | _____ |
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| Postal Address: | _____ |
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| Contact Nos. | _____ |
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CHALLAN FORM

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| Bank Copy | Sr. No. | |
|  UNIVERSITY OF NAROWAL <small>University of Narowal</small> | | |
|  Bank of Punjab (0061) 6510222875800028 | | |
| Title: University of Narowal misc & receipt A/C | | |
| Applicant's Name: | | |
| Father Name: | | |
| CNIC: | | |
| Contact No: | | |
| Post Applied For: | | |
| Basic Scale: | | |
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| Father Name: | | |
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| Sr. | Particulars | Amount |
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