1) Application for the Post of:

(Name in Block Letters)

2) Name of Applicant

applicable)
Bachelor (Hons.)
/ Master (16
Years)
MS / M.Phil
(18 Years)

## SHAIKH ZAYED HOSPITAL

Lahore - 54600

## **APPLICATION FORM**

Father'	s name:			Domicile D	istrict:			
Date of	Birth:			Age (on clo	osing dat	e):		
CNIC N	0:			Religion				
Contac	Contact No.:			Bank Challan Form No.:				
Postal A	Address:							
3) Academ	ic Qualificati	ion:						
Certificate /	Title of	Major Subject	Passin	g Obta	ained	Total	Percentage	Board /
Degree Level	Degree	/ Specialization	Year	Ma	arks	Marks		Universit
Primary								
Middle (8 <sup>th</sup> Class)								
Matric								
Intermediate								
Bachelor								
(14 years, if								

S (All Prof.							
ils) (If							
icable) oma / Other							
ma / Other							
						•	
4) Employ	ment Record / E	xperience:					
Sr. No.	Organization /	Employer	Job Title / Job D			Duration	
	Name (Please v	vrite the most	Position	-		То	
1.	recent first)						
1.							
2.							
3.							
4.							
Total Job	b Experience in re	elevant field as	on closing date	e of application	1		
E\ Trainin	g / courses Atten	adad ata i					
	<u>-</u>						
Sr. No.	Diploma / Certi	ficate	Duration	Institut		Marks / Grade	
1.				Univer	sity		
1.							
2.							
3.							
4.							
6) Additio	onal Experience (i	f any):					
<b>7</b> \ 11. <b>C</b>		<b>Y</b>	<b>A1</b> .				
7) Hafiz-e	-Quran	Yes	No				
8) (i) Are	you a Governme	ent Servant and	applying thro	ugh proper cha	nnel: Y	es No	1
(ii) NC	OC attached:	Yes	No				
(ii) NC	OC attached:	Yes	No				
(ii) NC	OC attached:	Yes	No				
	OC attached: g License Informa						
9) Driving		ation (for driver		No			

## 10) Undertaking by the Applicant:

I S/D	)/W of	do hereby declare that I have
read and understood the instruction	ons and conditions of the post, and	filled-up the application form as
per instructions and attached the	relevant documents / experience c	ertificates, as desired. In case of
any information contained herein	is found to be missing, untrue, fa	alse or forged at any stage, my
candidature can be cancelled at ar	ny stage (even after employment, if	so revealed later), and I shall be
liable to be proceeded upon legal a	action.	
Date:	Candidate's Si	gnature:

## 11) Checklist: Please check whether you have attached the copies of following:

Sr. No.	Description	Yes	No
1.	Attested Copy of Matric Certificate		
2.	Attested Copy of Intermediate Certificate		
3.	Attested Copy of Bachelor Degree (If applicable)		
4.	Attested Copy of Master / M.Phil Degree (If applicable)		
5.	Attested Copy of Ph.D Degree (If applicable)		
6.	Attested Copy of CNIC		
7.	Attested Copy of Domicile		
8.	Attested Copy of Experience Certificate		
9.	Photograph (02 Passport Size)		