Roll No.	(To be filled by NTS)



## (FATA SECRETARIAT RECRUITMENT FORM)

Affix a recent photograph
1.5 x 2 Inches only

- 1. Bank Online Deposit of Rs: 400/- for each post from Designated Bank Branches.
- 2. Name of position applied for (Tick only).

  (In case of more then one post, separate submission of fees is required, however one form is also acceptable)

	Agency Zakat Officer	Assist	tant	Steno, Opera	/Computer tor	
3. NAME in full (Use CAPITAL LETTERS)						
	ATHER'S NAMEAPITAL LETTERS)				D M M Y Y	
	I.C.# Only)		6. DATE			
	7. E-MAIL: (Mandatory, most of the future correspondence will be done using e-mail address)  8. Gender  Male   Female					
	9. CORRESPONDANCE POSTAL ADDRESS					
10.	Agency/F.R Name (if any)					
11. TELEPHONE NO. (OFF)(RES.)Mobile						
12. /	Any Disability:	□ Yes	□ No			
13. /	ACADEMIC RECORD:					
Certi	ficate/ Degree	Degree Title (Major Subjects)	Year Passing	Obtained %age only	Board/ University	
SSC	(10 Years)					
HSS	C (12 Years)					
Bach	nelors (14 Years)/ Equivalent					
Mast	er (16 Years)/Equivalent					
14.	PROFESSIONAL RECORD:					
Nam	e of Organization / Department	Name of Position		Working Experience (In Years)	Current Status (Employed / Un Employed)	

Note: Please do not attach any documents other than CNIC copy & Deposit slip

UNDERTAKING BY THE A	<u>PPLICANT</u>
do hereby solemnly aff appearing in the NTS F Peshawar advertised in t event any information o	d/s/w of
Date:	_Signature of the Candidate

## **Schedule of Screening Test**

S.No.	Description	Date
1	Last Date for submission of Application Form	02.08.2010
		(Monday)
2.	Issuance of Roll Number Slips / Display of Eligible List	06.08.2010
	of candidates at Website	(Friday)
3.	Test Date	17.08.2010
		(Tuesday)

Submission of form to:
Manager Operation, National Testing Services,
#402, Street#34, Sector:I-8/2,
Islamabad.

National Testing Service Building Standards in Educational and Professional Testing NTS COPY	NTS	Nati Building	onal Test	ing Service al and Professional Testing	
Branch Code: Date:	Branch Name:	Branch Code: Date:			Date:
Branch Name: ONLINE DEPOSIT SLIP (* Please tick the relevant bank)	(* Please deposit fee in a	ONLINE DEPOSIT SLIP  (* Please deposit fee in only one bank & tick the relevant bank)			
Remote J-8 Markaz Branch, Islamabad (1501)		Muslim C	ommercial Bank	Allied Bank Limited (Formely: Allied Bank of Pakistan Limited)	
Branch: 1-6 Marka: Branch: Islamaota (1301)   N/C   NTS-Collection   N/C   No. 0041749181000999	 		Branch, Islamabad (1501)	Remote Branch: Bara Tower Br Abbottabad (0	
Remark C. (1. P. D. J. J. (2011)			m A/C 0041749181000999 Charges Free of Cost	Note: Bank Service Charges Free of Cos	
Remote Branch: Cantt Br Rawalpindi (0041)  A/C Title: NTS-Collection   A/C No. 011-2530-9		UBL UNI	TED BANK uro.	HABIB BANK LTD THE POWER TO LEAD	
Allied Bank Limited Formely: Allied Bank of Palistan Limited)  Remote Bara Tower Br Abbottabad (0004)		Remote Branch:		Remote Jinnah Road Br Abbottabad (	0416)
Branch:   Bara Tower Br Abbottabata (10004)   AC   NTS-Collection   No.   01-100-2614-5			Charges Free of Cost	Note: Bank Service Charges Rs 137/- on	
Remote lineal Pond By Abbottabad (0.416)	Applicant's Name:	ransaction will be carried out e	ntirely at my risk and I Accept the term	and conditions in this regard.	
$ \begin{array}{c c} \textbf{Remote} & \textbf{Branch:} & \textbf{Jinnah Road Br Abbottabad (0416)} \\ \textbf{A^{IC}} & \textbf{NTS-Collection} & \textbf{A^{IC}} \\ \textbf{Title:} & \textbf{NTS-Collection} & \textbf{No.} & \textbf{0416-70001160-03} \\ \end{array} $	Father Name:				
Applicant's Name:	CNIC No/ B Form No:				
Father Name:	Applicant's Address:				
CNIC No/ B Form No:					
Amount Rs: Amount word: Rs., Non Refundable/ Non Transferable	Amount Rs:	400/-	Amount in word: Rs., Four H	undred Rupees Only.  able/ Non Transferable	
Applicant Signature Cashier Officer	Applicant' Signa	ature	Casi	nier	Officer
<del></del>					