

## APPLICATION FORM

**Public Sector Organization Government of** 

Pakistan

(366) Applying for: Driver (BPS-6) Branch Code Deposit Date Note: Test Center in the desired city will be arranged for minimum of 200 applicants. Once selected a test center cannot be changed. Passport size Recent □ Islamabad □ Lahore Multan 🗌 Karachi Photograph Affix with D.I. Khan □ Hyderabad **Quetta** □ Peshawar Gum (Latest By 6 **Test City: Faisalabad** Gujranwala Bahawalpur Sukkur months) (Tick only one) 🗌 Larkana 🗌 Kohat □ Mardan 🗌 Bannu Swat GB □ Shaheed Benazir Abad y:1 ' 3ip y 3p3 <sup>1</sup>:p i Domicile District: Punjab Balochistan Sindh (U) Sindh (R) Domicile КРК Islamabad Capital Territory FATA **Province:** (Tick only Azad Jammu and Kashmir **Gilgit Baltistan** Other one)

## 1. Personal Information (InBlock Letters)

Name (in Full):		l	Note: Tick Only One	Circle in each	Row.
Father's Name:			Religion: OMusl	m 🔿 Non-M	luslim
			Are You Disable?	⊖ Yes	ONO
CNIC/B-Form:			Gender:	⊖ Male	) Female
Age:	Date of Birth (D-M-Y) Marital Status:		Armed Forces:	⊖ Yes	◯ No
, . <u></u>			Only for personnel of	Armed Forces of I	Pakistan
Postal Address:			Deceased Servant:	⊖Yes │ ⊖ N	lo
FUSIAI AUULESS.			Deceased Civil Servan	t wife, son or d	aughter
			Government Servant:	⊖ Yes	ONO
Phone #:	Cell #:		with Two Years Co	ntinuous Experier	nce
	(Do r	not give here Network	Scheduled Cast /Budd	hist: 🔿 Yes	ONO
Email (IF ANY):		erted mobile Numbers)	Driving License	⊖ Yes	○ No

2. Academic Information (Note:Incase of incompleteacademicinformation, Your Application will be Declined.)							
Certificate/Degree	Degree Title	Major Su	bjects	Year of Passing (D-M-Y)	Marks Obtained	Total Marks	Institution Name
Primary							
Middle							
SSC (10 years)							
HSSC / DAE / A-Level (12 / 13 years)							
Bachelor (14 years)							
Bachelor(Hons)/Master							
(16 years)							
MS / M.Phil. (18 years)							
3. Employment Inform	nation (Note:Ifyouneedmore	e rows towriteyour	information, yo	bucan addanad	ditional pagewit	hApplicatio	n Form.)
Organization Type	Organization	Name	Desi	ignation	Start Da	ate	End Date
(Government / Semi Government / Private)	(Name of the Organiza	ation / Dept.)		nation / Positior Title)	ו ((D-M-Y	())	((D-M-Y))

## 4. Undertaking by Applicant

I\_\_\_\_\_\_d/s/w of\_\_\_\_\_\_do hereby solemnly affirm that I have read and understood the conditions for applying in the above mentioned Post and that I have filled the form as per instructions given above and in the event any information contained herein is found to be untrue, Ishall be liabletodisciplinary action which mayresultin cancellation of my candidatureat any stage.

Signature & Date: ..... Thumb Impression (Left Hand): .....

## **Document Check list:**

Tick if Attached / selected:

- □ Photograph is Attached
- $\hfill\square$  Original bank Deposit Slip is Attached on the back side of Application Form
- □ CNIC Copy is Attached on the back side of Application Form

## **Instructions:**

- ALL DATAFIELDS ARE REQUIRED TOBE FILLED. FILL YOUR APPLICATION FORM CAREFULLY.
- Application Fee (Service Charges) is nonrefundable / nontransferable. Bank Online Deposit of Rs. 300/- must be attached with application form.
- In case of more than one apply use separate application form along with original deposit slip.
- Application must reach OTS office latest by last date of submission of application form.
- OTS will not be responsible for late receiving of application through courier / Pakistan post etc.
- Attach your recent photograph (Latest by 6 Months), CNIC copy, original bank deposit slip with this application form.
- Without Signature & Thumb impression, your application form will not be entertained.
- Without photograph your application form will not be entertained.
- In-complete forms will not be entertained. (All the fields are mandatory / Required)
- In Person/By hand submission of Application form is not allowed.
- Mobile phones or other electronic gadgets are not allowed in test center premises.
- Please visit OTS website according to the test schedule to check your status.

Cut Address box given below and affix it with gum on the envelope.

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Send Registration Form to:

Manager Operation,

Office No 01, Central Avenue,

## Phase 6, Bahria Town, Islamabad

Help Line: 051-111 687 222 Email: info@ots.org.pk, Website: www.ots.org.pk

# **Open Testing Service**

Innovation in Training & Assessment

## **OTS Copy**

Date:

Branch Code: Branch Name:

Innovation in Training & Assessment

# **BANK** Copy

Branch Code:

Branch Name:

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### **ONLINE DEPOSIT SLIP**

Please deposit in only one bank & tok the relevant Bank

HBL With Land	Habib Bank Limited
Remote Branch:	Habib Bank Limited, PWD Branch (2328)
Account Title:	Open Testing Service
Account Number:	23287106336103
Amount in Figures:	Rs.300
Amount in Words:	Three hundred only
Note Bank Service C	harges Free of Cost

A Bank Alfalah	Bank Alfalah Limited
Remote Branch:	Bank Alfalah, PWD Branch (0335)
Account Title:	Open Testing Service
Account Number:	0335001004927667
Amount in Figures:	Rs. 300
Amount in Words:	Three hundred only
Note: Bank Service C	harges Free of Cost

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ODen	esund	Service

ONLINE DEPOSIT SLIP

Date:

Please deposit in only one bank & tick the relevant Bank

HBL William	Habib Bank Limited
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Account Title:	Open Testing Service
Account Number:	23287106336103
Amount in Figures:	Rs. 300
Amount in Words:	Three hundred only
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Account Title:	Open Testing Service
Account Number	0335001004927667
Amount in Figures:	Rs. 300
Amount in Words:	Three hundred only
Note: Bank Service C	harges Free of Cost

Allied Bank	Allied Bank Limited	1
Sr no	5133	J.
Remote Branch	ABL Islamic Banking, PWD Branch	
Account Title :	Open Testing Service	
Account Number :	0020050208060021	1
Amount in Figures:	Rs: 325	
Amount in Words:	Three hundred and twenty five only	-

Note: Inclusive of Bank Service Charges

Applicant Name: Applicant Father Name CNIC No. / Form B No

Applied For.

Actes: Inclusive or bank service unarges The Bank MuertHolm of St Oopy of the Gendidate. About CNC Dopy with depositing Application: Form will not be embediated without organic Deposit. Dip Application: Form will not be embediated offer than applications by provide any folies country wide Books State. Date through Books E all any folies country wide Books State. Date through States and any folies country wide Books Country of the Books State. Date through States and any folies country wide Books account invites and amount deposited are concept and satisfy that complete details including account invites and amount deposited are concept private failing which the bank will out be necessities.

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	Applicant Name:
	Applicant Father Name
	CNIC No. / Form B No.
	Applied For:

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Allied Bank Limited A Allied Bank Sr No 5133 ABL Islamic Banking PWD Branch **Remote Branch** Account Title: **Open Testing Service** 0020050208060021 Account Number: Amount in Figures: Rs: 325 Amount in Word: Three Hundred and Twenty Five Only

Note: Inclusive of Bank Service Charges

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Applicant Name:	
Applicant Father Name:	
CNIC No. / Form B No.:	
Applied For:	

------Applicant Signature

تمام امیدوارن جو Public Sector Organization میں اپلائی کرنے کے خواہشمند ہیں ان کومطلع کیا جاتا ہے کہ

24 hours / Daisa / Easy paisa کے زریعے بھی کسی بھی وقت ( Online Banking/ Jazz Cash/U Paisa / Easy paisa مندرجہ ذیل بینک اکاؤنٹ میں Transaction کر سکتے ہیں

يا

برائے راست بینک میں درخواست فارم کے ساتھ منسلک Deposit slipکو بھی جمع کروا سکتے ہیں۔

Habib Bank Limited HBL :( Branch Code: 2328) 23287106336103 Bank Alfalah Limited (Branch Code: 0335) 0335001004927667 Allied Bank Limited ABL (Branch Code: 5133) 51330020050208060021

ہونے پر Transaction کی رسید یا(Screen Shot) ہمع درخواست فارم مندرجہ ذیل پتہ پر Transaction ارسال کریں۔

Manager Operation, Office No 01, Central Avenue, Phase 6, Bahria Town, Islamabad Help Line: 051-111 687 222 Email: info@ots.org.pk, Website: www.ots.org.pk