

APPLICATION FORM

Public Sector Organization Government of Pakistan

OTS REG # For Official Use

(366)

Applying for: Duplicate Machine Operator (BPS-4)

Bank Online Deposit (*Note: Application Form will not be entertained without Original Deposit Slip.)											
ALFALAH, (ANY BRANCH) (ANY BRANCH) (ANY BRANCH) (ANY BRANCH)											
		ill be arranged for minimum of 200 ap	-	Branch Code				Passpor	t size Recent		
☐ Islamabad		☐ Lahore				☐ Karachi		•	ph Affix with		
Took City	☐ Quetta	☐ Peshawar		☐ D.I. Khan		☐ Hyderabad		Gum (Latest By 6			
Test City: (Tick only one)	☐ Faisalabad	☐ Gujranwala	☐ Bahawa			ur		· ·	onths)		
Laikalla		☐ Kohat	☐ Mardar	an L Bannu eed Benazir Abad		u		,,,,	ontinay		
	☐ Swat	L GB		u benazii	Abau			V:1	' 3ip		
Domisilo Dist	trict.							-	o3 ¹:p i		
	□ Punjab	iab 🗆 Balochistan Sindh (U) 🗆 Sindh (R)									
Domicile Province:											
(Tick only		u and Kashmir		altistan		ther					
one)											
4 5	17.6										
	al Information	(In Block Letters)				Note: Ti	ak Ombu (Duna Cinala in	each Daw		
Name (in Fu	II):					Religion		One Circle in Muslim	Non-Muslim		
Father's Name:							Disable?		Yes No		
CNIC/B-Form:						Gender		∩ Male	Female		
Age: Date of Birth (D-M-Y) Marital Status:						Armed Forces: Yes No					
Age:	Date of Birt	.n (D-M-Y)IVIa	ritai Status:					onnel of Armed Forces of Pakistan			
Postal Addre	ss:					Deceased Servant: Yes No Deceased Civil Servant wife, son or daughter					
Governmen											
Phone #:Cell #:								with Two Years Continuous Experience			
	(Do not give here Network Scheduled Cast / Buddhist: Yes No										
Email (IF ANY)	:		convert	ed mobile Nu	umbers)						
2 Acadom	nic Information	7 /N-tl	I:-:f		-1:	Uh - Da -lia	l \				
_		1 (Note: Incase of incompletea Degree Title			Plicationwi Year		ed.) Marks	Total	Institution		
Certificate/Degree		Degree Title	Major Subje		Passing		Obtained	Marks	Name		
Duimany					(D-N	I-Y)					
Primary											
Middle											
SSC (10 years)											
HSSC / DAE (12 / 13 years)	E / A-Level										
Bachelor (14 years)											
Bachelor(Hons)/Master											
(16 years)											
MS / M.Phi											
		tion (Note: If you need more			•						
	ization Type		Organization Name		Designation		Start Date ((D-M-Y))		End Date		
	/ Semi Government / Private)	(Name of the Organizat	(Name of the Organization / Dept.)		(Your Designation / Position Title)		((D-N	vi-Y))	((D-M-Y))		
,					,						

4. Undertaking by Applicant	
Id/s/w of	do hereby solemnly
affirm that I have read and understood the conditions for applying in the above mention filled the form as per instructions given above and in the event any information contained untrue, Ishall be liabletodisciplinary action which may result in cancellation of my candidature.	ed herein is found to be
Signature & Date: Thumb Impression (Left Hand):	
Document Check list:	
Tick if Attached / selected:	
☐ Photograph is Attached	
☐ Original bank Deposit Slip is Attached on the back side of Application Form	
☐ CNIC Copy is Attached on the back side of Application Form	
<u>Instructions:</u>	
ALL DATA FIELDS ARE REQUIRED TO BE FILLED. FILL YOUR APPLICATION FORM CAREFULL	Y.
 Application Fee (Service Charges) is nonrefundable / nontransferable. Bank Online Deposit of 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 pos	st etc.
 Attach your recent photograph (Latest by 6 Months), CNIC copy, original bank deposit slip w 	ith 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.	
×	
Send Registration Form to:	
Send negistration 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

OTS Copy

Branch Code:	Date:/	Branch Code: Date: /_/					
Branch Name:		Branch Name:					
Lancon Company of Print	ILINE DEPOSIT SLIP sit in only one bank & tick the relevant Bank	21	NLINE DEPOSIT SLIP osid in only one bank & sck the relevant Bank				
HBL WORK	Habib Bank Limited	HBL HAND SHARE	Habib Bank Limited				
Remote Branch:	Habib Bank Limited, PWD Branch (2328)	Remote Branch:	Habib Bank Limited, PWD Branch (2328)				
Account Title:	Open Testing Service	Account Title:	Open Testing Service				
Account Number:	23287106336103	Account Number	23287106336103				
Amount in Figures: Rs.300		Amount in Figures:	Rs. 300				
Amount in Words:	Three hundred only	Amount in Words:	Three hundred only				
Note Bank Service Ch	arges Free of Cost	Note: Bank Service C	Charges Free of Cost				
A Bank Alfalah	Bank Alfalah Limited	A Bank Alfalah	Bank Alfalah Limited				
PERSONAL PROPERTY AND ADDRESS OF THE PARTY O	Bank Alfalah, PWD Branch (0335)	Remote Branch:	Bank Alfalah, PWD Branch (0335)				
Account Title:	Open Testing Service	Account Title:	Open Testing Service				
	0335001004927667	Account Number	03.35001004927667				
Amount in Figures:	Rs. 300	Amount in Figures:	Rs. 300				
Amount in Words:	Three hundred only	Amount in Words:	Three hundred only				
Note Bank Service Ch	arges Free of Cost	Note: Bank Service C	Charges Free of Cost				
Allied Bank	Allied Bank Limited	Allied Bank	Allied Bank Limited				
Sr no	5133	Sr No	5133				
Remote Branch	ABL Islamic Banking, PWD Branch	Remote Branch	ABL Islamic Banking PWD Branch				
Account Title :	Open Testing Service	Account Title:	Open Testing Service				
Account Number :	0020050208060021	Account Number:	0020050208060021				
Amount in Figures:		Amount in Figures: Rs: 325					
Amount in Words:	Three hundred and twenty five only	Amount in Word: T	hree Hundred and Twenty Five Only				
 The Back Must Return 0.75 x 2. Attach CROC Copy with depose Application Form will not be exapplication Form will not be exapplication. Form will not be on application Form will not be obtained to be obtained to a separate of Deposit it in any tentine country. Cash shrould always the depose receipt sprinted through factors be oughter, please be suit. 	if sig. theraned without Original Deposit Sig. theraned without Driginal Deposit Sig. on both the Deposit Sig.	The Burk Mass Return OTS Alash CNSC Copy with dep Application Form will not be Application From will not be Application From will not be FEP Endorpement is require Deposit thin any orithe cou	ost blic. ententamed without Original Deposit Sile. ententamed other than against cash payment. ed on both the Deposit Silo.				
Applicant Name:		Applicant Name:					
Applicant Father N	lame:	Applicant Father	Name:				
CNIC No. / Form B No.:		CNIC No. / Form B No.:					
CINIC NO.7 FORE	Applied For:		Applied For:				

Open Testing Service

BANK Copy

(ضروری ہدایات)

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

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

یا

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

Transaction کی رسید یا (Screen Shot) بمع درخواست فارم مندرجہ ذیل پتہ پر المحدد کی رسید یا (Screen Shot) بیت پر

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