

APPLICATION FORM

FEDERAL LAND COMMISSION, GOVERNMENT OF PAKISTAN

TAG # (For Official use)

Applying for: Stenotypist (BS-14) (378) 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 Photograph Affix with **Test City:** Gum (Latest By 6 months) Note: ALL DATA FIELDS ARE REQUIRED. FILL YOUR Domicile District: -----**APPLICATION FORM CAREFULLY.** Puniab **Balochistan** Sindh (U) Sindh (R) **Domicile KPK Islamabad Capital Territory FATA Province:** (Tick only one) Azad Jammu and Kashmir Gilgit Baltistan Other 1. Personal Information (In Block Letters) Note: Tick Only One Circle in each Row. Name (in Full): Religion: Muslim Non-Muslim Father's Name: Are You Disable? ○ Yes \bigcirc No CNIC/B-Form: Female Gender: Date of Birth (D-M-Y) -----Marital Status: Armed Forces: ○ No Only for personnel of Armed Forces of Pakistan Postal Address: Deceased Servant: Deceased Civil Servant wife, son or daughter Government Servant: \bigcirc No Cell #: ____ Phone #: (Do not give here Network Scheduled Cast /Buddhist: Yes \bigcirc No converted mobile Numbers) 2. Academic Information (Note: In case of incompleteacademic information, Your Application will be Declined.) Marks Institution Certificate/Degree Year of Total Grade/ **Degree Title Major Subjects Passing** Obtained Marks Percentage Name **Primary** SSC (10 years) HSSC / DAE / A-Level (12/13 years)Bachelor (14 years) Bachelor(Hons)/Master (16 years) MS / M.Phil. (18 years) **Other** (Diploma / Certificate) 3. Employment Information (If Applicable) (Note: If you need more rows to write your information, you can add an additional pagewith Application Form.) Organization Type **Organization Name** Designation Start Date **End Date** Job Description (Government / Semi Government (Name of the Organization / Dept.) (Your Designation / Position (Starting Date) (End Date) / Private) Title)

4. Undertaking by Applicant I	d/s/w ofdo hereby solemnl
filled the form as per instruction	d/s/w ofdo hereby solemnly erstood the conditions for applying in the above mentioned Post and that I have as given above and in the event any information contained herein is found to be ary action which may result in cancellation of my candidate ureat any stage.
Signature & Date:	Thumb Impression (Left Hand):
Document Check list:	
Tick if Attached / selected:	
	ack side of Application Form y is Attached on the back side of Application Form
☐ CNIC Copy is Attached on the b	
☐ CNIC Copy is Attached on the b☐ Original bank Deposit Slip Copy Instructions: • ALL DATA FIELDS ARE REQU	y is Attached on the back side of Application Form JIRED TO BE FILLED. FILL YOUR APPLICATION FORM CAREFULLY. arges) is nonrefundable / nontransferable. Bank Online Deposit of Rs. 150/-must be
□ CNIC Copy is Attached on the b □ Original bank Deposit Slip Copy Instructions: • ALL DATA FIELDS ARE REQU • Application Fee (Service Chattached with application for In case of more than one application)	y is Attached on the back side of Application Form JIRED TO BE FILLED. FILL YOUR APPLICATION FORM CAREFULLY. arges) is nonrefundable / nontransferable. Bank Online Deposit of Rs. 150/-must be rm. ly use separate application form along with original deposit slip.
□ CNIC Copy is Attached on the b □ Original bank Deposit Slip Copy Instructions: • ALL DATA FIELDS ARE REQU • Application Fee (Service Chattached with application for In case of more than one appl • Application must reach OTS • OTS will not be responsible	VIRED TO BE FILLED. FILL YOUR APPLICATION FORM CAREFULLY. arges) is nonrefundable / nontransferable. Bank Online Deposit of Rs. 150/-must be m. ly use separate application form along with original deposit slip. office latest by last date of submission of application form. for late receiving of application through courier / Pakistan post etc.
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Send Registration Form to:

Manager Operation (FLCGP), Open Testing Service (OTS), 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

FEDERAL LAND COMMISSION محكمه وفا قى زرعى اصلاحات اسلام آباد

Applied for the post of	عنوان. درخواست برائے بھرتی بطورعنوان. درخواست برائے بھرتی بطور
Gender:- Male/ Female	جنس ـ مرد/ عورتــــــــــــــــــــــــــــــــــــ
(Quota) Applied Against:	(کوٹم) جس کے تحت درخواست دی گئی ہے۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔
Dear Sir, It is requested that applicant have come to know by a newspaper that some posts of ———————— are lying vacant under your kind control	جناب عا لٰی مودبانہ گزارش ہے کہ بندہ کو بذریعہ اخبار معلوم ہوا ہے کہ آپ کے زیر سایہ۔۔۔۔۔۔ کی چند آسامیاں خالی ہیں۔
According to the application it is requested please appoint me as	بذریعہ درخواست استدعا ہے کہ بندہ کو بطور بھرتی کیا جائے۔
My details are as under	میر ے کوانف درجہ ذیل ہیں۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔
Name	نام
Father's\Husband's Name	ولديت/شوبركا نام
CNIC No	شناختی کارڈ نمبر
Qualification	تعلم
Date of Birth	تاريخ پيدانش
Domicile	<u>ڐۅميسانل</u>
Permanent Addres	مىنقل پتر
Postal Address	ڈاک کا پتہ
Experience	تجربہ
Mobile No	موبائل نمبر
Applicant Signature	درخواست دهنده کے دستخط

Open Testing Service

Open Testing Service Innovation in Training & Assessment

BANK Copy

OTS Copy

Branch Code:

Branch Name:			Branch Name:			
ONLINE DEPOSIT SLIP Please deposit in only one bank & tick the relevant Bank			ONLINE DEPOSIT SLIP Please deposit in only one bank & tick the relevant Bank			
HBL Management	Г	Habib Bank Limited	HBL MADE		Habib Bank Limited	
Remote Branch:	Ha	abib Bank Limited, PWD Branch (2328)	Remote Branch:	Habi	ib Bank Limited, PWD Branch (2328)	
Account Title:			Account Title:	Open Testing Service		
Account Number: 23287106336103			Account Number:	23287106336103		
Amount in Figures: Rs.150			Amount in Figures:	Rs150		
Amount in Words:				nt in Words: One Fifty Rupees Only		
Note: Bank Service C	harg	es Free of Cost	Note: Bank Service C	harges	s Free of Cost	
A		Bank Alfalah Limited	A		Bank Alfalah Limited	
Remote Branch:	Ro	ink Alfalah, PWD Branch (0335)	Remote Branch:	Bank	k Alfalah, PWD Branch (0335)	
Account Title:	-	pen Testing Service	Account Title:	-	n Testing Service	
Account Number:	-	35001004927667	Account Number	THE STATE OF THE S		
Amount in Figures:	-	150	Amount in Figures:	Rs.1		
Amount in Words:	-		Amount in Words:	-	One Fifty Rupees Only	
Amount in Words: One Fifty Rupees Only Note: Bank Service Charges Free of Cost		Note: Bank Service C				
Wole. Bark Service C	rian y	ps 7780 01 Cost	Note: Bank Service C	i iai ges	s Proe or Gos	
Allied Bank		Allied Bank Limited	Allied Bank		Allied Bank Limited	
Remote Branch:	AB	St. Islamic Banking, PWD Branch (5133)	Remote Branch:	ABL	Islamic Banking, PWD Branch (5133	
Account Title:	Op	en Testing Service	Account Title:	Ope	n Testing Service	
Account Number:	00	20050208060021	Account Number:	0020050208060021		
Amount in Figures:	Rs	175	Amount in Figures:	Rs.175		
Amount in Words:		One Seventy Five Rupees Only	Amount in Words:	0	ne Seventy Five Rupees Only	
Note: Inclusive of Bank Service Charges			Note: Inclusive of Bank Service Charges			
 Application Form will not be FBP Endorsement is require Deposit it in any online cour Cash should always be deprecept printed through fialls the counter, please be sur 	self sily enterts enterts id on b try wid osified est prin e to si	p. anned without Original Deposit Stip. anned other than agend cash payment. ooth the Deposit Stip.	Application Form will not be FBP Endonsement is require Deposit if in any online cool Cash should wheeys be deprecisely printed through fast the counter, please be sur	pelt slip. entertains entertains entertains ed on both try wide t costed at r ed printer e to chec	ed without Original Deposit Stip. ed other than against cash payment. h the Deposit Stip.	
Applicant Name:	Applicant Name:		Applicant Name:			
Applicant Father	Applicant Father Name:		Applicant Father CNIC No. / Form Applied For:	Applicant Father Name:		
CNIC No. / Form B No.:		CNIC No. / Form B No.:				
Applied For:	pplied For:		Applied For:			
Applicant Sig			X Applicant Sig			