

### APPLICATION FORM

#### $Primary\ Health care\ in\ Sindh\ in\ Partnership\ with\ Government\ of\ Sindh$

**for:** Assistant Finance & Accounts

OTS REG # For Official Use

Bank Onlin	ne Deposit	(*Note: Application Form	will not be enterta	ined without C	Original Depo	sit Slip.)			
ALFALA (ANY BRANCH)	AH, D	ANCH	ABL, RANCH) - Habib Metro,	Branch Code		Deposit Date			
Note: Test Ce	nter in the desired cit	(ANY B ty will be arranged for minimum o	RANCH)	selected a test cent	ter cannot he cha	anged	Passp	ort size Recent	
Note. Test Cer	☐ Karachi	□ Thatta		obabad	☐ Sangha		Pho	tograph Affix	
	☐ Umarkot	☐ Hyderaba			☐ Mīrpui			with	
Test City:	☐ Khairpur	☐ Inyderaba		do Allahyar					
(Tick only one)	☐ Tando M I		☐ Suja		☐ Tharpa		Gun	n (Latest By 6	
	☐ Larkana	☐ Jacobaba		heed Benazir		ii Kui			
	Larkana	Jacobaba	Note: All data			ll vour	y:1	1	
Domicile Distri	ct:				•	ii youi		7 3p3 ¹:p	
Domicile Province: (Tick only one)		Sindh (U)		☐ Sindh (R)		R)			
	alInformati	i <b>on</b> (In Block Letters)					l		
		OII (III DIOCK Letters)				oto, Tiek Oak	One Circle	in each Daw	
Name (in Fu	II):							e in each Row.	
Father's Nam	ne:					Religion: Muslim Non-Muslim			
						Are You Disable? Yes No			
CNIC/B-Form	ı. <u> </u>					Gender:	$\bigcirc$ M		
Age:Date of Birth (D-M-Y) Marital Status: Armed Forces: Only for personnel of A								Yes No Forces of Pakistan	
Postal Addre						Deceased Serva	_	es No	
rostal Addre						Deceased Civil S	Servant wife	e, son or daughter	
Government							rvant:	○ Yes ○ No	
Phone #:		Cell #:				with Two Y	'ears Continu	ous Experience	
						Scheduled Cast	/Buddhist:	○ Yes ○ No	
Email (IF ANY): (Do not give here Network converted mobile Numbers)									
2. Academic	Information	${f n}$ (Note: Incase of incomplete	e academic informa	ation. Your Appli	cation will be	Declined.)			
Certificate/		Degree Title	Major Su		Year of Passing (D-M-Y)	Marks Obtained	Total Marks	Institution Name	
SSC (10 years)									
HSSC / DAE / A	A-Level								
Bachelor (14 ye	ars)								
Bachelor (Hor (16 years)	-								
MS / M.Phil. (10	8 years)								
PhD									
Other (Diploma /	Certificate)								
3. Employme	ent Informa	tion (Note: If you need moi	re rows to write vou	r information. ve	ou can add an	additional page v	with Applica	tion Form.)	
		Organization			gnation	Start Da		End Date	
Organization Type (Government / Semi Government / Private)			(Name of the Organization / Dept.)		(Your Designation / Position Title)		))	((D-M-Y))	

4. Undertaking by Applicant  I									
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									
Instructions:									
<ul> <li>All data fields are required to be filled. Fill your application form carefully.</li> <li>Application Fee (Service Charges) is nonrefundable / nontransferable. Bank Online Deposit of Rs. 220/- must be attached with application form.</li> <li>In case of more than one applies use separate application form along with original deposit slip.</li> <li>Application must reach OTS office latest by last date of submission of application form.</li> <li>OTS will not be responsible for late receiving of application through courier / Pakistan post etc.</li> <li>Attach your recent photograph (Latest by 6 Months), CNIC copy, original bank deposit slip with this application form.</li> <li>Without Signature &amp; Thumb impression, your application form will not be entertained.</li> <li>Without photograph your application form will not be entertained.</li> <li>In-complete forms will not be entertained. (All the fields are mandatory / Required)</li> <li>In Person/By hand submission of Application form is not allowed.</li> <li>Mobile phones or other electronic gadgets are not allowed in test center premises.</li> <li>Please visit OTS website according to the test schedule to check your status.</li> </ul>									
Cut Address box given below and arrix it with gum on the envelope.									
Send Registration Form to:									

Manager Operation (PHC),
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

## Open Testing Service Innovation in Training & Assessment

**BANK Copy** 

#### OTS Conv

Applicant Signature

Cashier

Branch Code:	Date://	Branch Code:	Date://				
Branch Name:		Branch Name:					
the surroughlists	NLINE DEPOSIT SLIP osit in only one bank & tick the relevant Bank	*	NLINE DEPOSIT SLIP osit in only one bank & tick the relevant Bank				
HBL	Habib Bank Limited	HBL MANUEL	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:		Amount in Figures:	Rs. 220				
Amount in Words:	Two Hundred & Twenty Rupees only	Amount in Words: Two Hundred & Twenty Rupees					
Note: Bank Service C		Note: Bank Service C	harges Free of Cost				
THOSE DAME COTTION O	, mangos 1100 da 0051						
	Bank Alfalah Limited	A Bank Alfalah	☐ Bank Alfalah Limited				
Remote Branch:	Bank Alfalah, PWD Branch (0335)	Remote Branch:	Bank Alfalah, PWD Branch (0335)				
Account Title:	Open Testing Service	Account Title:	Open Testing Service				
Account Number:	0335001004927667	Account Number:					
CA-1914 of Chical Carlo Scolume and S	CONTRACTOR	Amount in Figures:					
Amount in Figures:	Two Hundred & Twenty Rupees only	Amount in Words:	Two Hundred & Twenty Rupees only				
Amount in Words:		Note: Bank Service C					
Note: Bank Service C	Tharges Free of Cost						
	Allied South Limited	Allied Bank	Allied Bank Limited				
Allied Bank	Allied Bank Limited	Remote Branch:	ABL Islamic Banking, PWD Branch (5133				
Remote Branch:	ABL Islamic Banking, PWD Branch (5133)	Account Title:	Open Testing Service				
Account Title:	Open Testing Service	Account Number:					
Account Number:	51330020050208060021	Amount in Figures:					
Amount in Figures:		Amount in Words:	Two Hundred & Seventy Rupees only				
Amount in Words:	Two Hundred & Seventy Rupees only	Note: Inclusive of Bar					
Note: Inclusive of Bar	nk Service Charges	THORE, INCIDENTE OF DELI	in del vice Charges				
HABIBMETRO	Habib Metropolitan Bank	HABIBMETRO	Habib Metropolitan Bank				
Remote Branch:	Habib Metro Bank, PWD Branch (0403)	Remote Branch:	Habib Metro Bank, PWD Branch (0403)				
Account Title:	Open Testing Service	Account Title:	Open Testing Service				
Account Number:	6040320301714129764	Account Number:	6040320301714129764				
Amount in Figures:	Rs. 220	Amount in Figures:	Rs. 220				
Amount in Words:	Two Hundred & Twenty Rupees only	Amount in Words:	Two Hundred & Twenty Rupees only				
Note: Bank Service C		Note: Bank Service C	Charges Free of Cost				
<ul> <li>Application Form will not be:         <ul> <li>FBP Endorsement is require</li> </ul> </li> <li>Deposit it in any online count</li> <li>Cash should always be depreceipt printed through flatbe the counter, please be sure</li> </ul>	entertained without Original Deposit Stip. entertained other than against cash payment. d on both the Deposit Stip.	Application Form will not be -     FBP Endorsement is required     Deposit it in any online count     Cash should always be deponently printed through flushed     the counter, please be sure	isit stip. antertained without Original Deposit Stip. entertained other than against cash payment. d on both the Deposit Stip.				
Applicant Name:		Applicant Name:					
Applicant Father I	Name:	Applicant Father Name:					
CNIC No. / Form	B No.:	CNIC No. / Form	CNIC No. / Form B No.:				
Applied For:		Applied For:					

Applicant Signature

Cashier