



# UNIVERSITY OF OKARA

2- KM Main Multan Road, Renala Khurd Bypass, Okara

## JOB APPLICATION FORM (For Administrative Position)

Affix one  
recent  
Passport size  
photograph

<b>Job Applied For:</b>		<b>Sr. #</b>	
<b>Special Quota (if any)</b> Please tick relevant Box:	<b>Disabled</b>	<b>Women</b>	<b>Minorities</b>
<b>Reference of Bank Draft # / Challan Form</b>			

### 1. Personal Information

<b>Name:</b> Mr./Mrs./Miss (in block letters)														
<b>Father/Husband's Name:</b> (in block letters)														
<b>Postal Address:</b>														
<b>Personal Mobile/Telephone Number:</b>														
<b>Emergency Contact Number:</b> (at least two mobile/phone numbers, other than personal number in case of emergency communication of information)														
<b>Email Address:</b>														
<b>Date of Birth:</b>	Day	Month	Year	<b>Age</b>				Years	Months	Days				
				<b>On closing date of Ad</b>										
<b>C.N.I.C. No:</b>														
<b>Marital Status:</b>	Married						Unmarried							
<b>Gender:</b>	Male						Female:							

### Receipt

Received by: Name \_\_\_\_\_ Signature \_\_\_\_\_

Diary No.: \_\_\_\_\_ Date: \_\_\_\_\_

## 2. EDUCATIONAL QUALIFICATIONS (in chronological order)

Certificate/ Degree	Major Subjects	Institution	Passing year	Marks / CGPA		Percentage / CGPA
				Obtained	Maximum	
Matric						
FSc/FA						
BSc/BA						
MSc/MA/ BBA (Hons.)						
MPhil/MS						
PhD						
Other specialized training						

## 3. KIND OF AVAILED LEAVES

### A: Study Leaves (Required copies enclosed, if applicable)

Sr. No.	Study leave (i.e. MPhil, PhD, Post Doc. etc.)	Duration						Total Length of availed Leaves			
		From			To						
		D	M	Y	D	M	Y	D	M	Y	
1.											
2.											
<b>Total Leaves</b>											
Sr. No.	B. Other leaves (i.e. Leave, EL, EOL, ML etc.) (Required copies enclosed, if applicable)	Duration						Total Length of availed Leaves			
		From			To						
		D	M	Y	D	M	Y	D	M	Y	
1.											
2.											
<b>Total Leaves</b>											

**4. WORK PERFORMED EXPERIENCE.**

Organization	Position held/major duties	Duration						Total Experience		
		From			To			D	M	Y
		D	M	Y	D	M	Y			
<b>Total Experience</b>										

**4. PUBLICATIONS (Research publications in HEC / PEC recognized journals). Attach a separate list of publications if the given space is insufficient.**

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**5. DISTINCTIONS/AWARDS IN THE PRESCRIBED QUALIFICATION (IF ANY)**

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**6. REFERENCES**

1.	
2.	
3.	

# UNIVERSITY OF OKARA

## CERTIFICATE OF DEPARTMENTAL PERMISSION

To be submitted by the candidate who is in govt./semi govt./autonomous body service with the application form duly completed and attested by the concerned Registrar/Head, failing which the application shall be rejected.

**1. The following should be filled in by the candidate: -**

a. Name:

b. Father's Name:

c. Post held presently:

d. Office / Department:

e. Post applied for:

f. Advertisement dated:

Dated: \_\_\_\_\_

Signature of the Candidate \_\_\_\_\_

**2. (This portion should be filled in by the Department / Office.)**

The above candidate has been permitted by this Office / Department to apply for the said post and that: -

- a. He has been employed in this Department / Office as \_\_\_\_\_ (BS- ) since \_\_\_\_\_.
- b. He holds this post in **permanent/temporary/contract** capacity.
- c. If a Departmental candidate / employee is selected, he / she will be relieved by the parent Department to join the post for which he / she has applied.

**SIGNATURE & STAMP**

Dated: \_\_\_\_\_

**7. CHECK LIST**

Identify documents attached with this application

- |     |  |  |
|-----|--|--|
| 1.  | Academics Certificates / Degrees   |  |
|     | a. Matriculation   |  |
|     | b. Intermediate  |  |
|     | c. Bachelor  |  |
|     | d. Master/BS Hons.   |  |
|     | e. M. Phil/MS  |  |
|     | f. Ph.D.   |  |
| 2.  | CNIC   |  |
| 3.  | Two passport size photographs  |  |
| 4.  | Domicile Certificate   |  |
| 5.  | Experience / Service Certificate/s   |  |
| 6.  | Certificate/s of Distinction/s   |  |
| 7.  | Certificate/s of Co-curricular Activities:   |  |
| 8.  | In case of Govt. service, Departmental Permission Certificate from Appointing Authority. |  |
| 9.  | In case of Ex-Serviceman, Discharge Certificate  |  |
| 10. | Any other document   |  |

**8. DECLARATION**

I hereby solemnly declare that all the information provided herein is correct to the best of my knowledge and belief.

Date: \_\_\_\_\_ Candidate's Signature: \_\_\_\_\_

**9. Instructions for submission of Job Application Processing Fee:**

Application processing fee may be deposited using any of the following procedures;

1. Prepare a Bank Demand Draft in favour of, 'TREASURER, UNIVERSITY OF OKARA', (NTN: 9021534-6) and attach the original copy with the application form.

**OR**

2. Deposit the Application Fee in any HBL Branch (Habib Bank Limited) in the following account;

Title of Account: **'TREASURER UO OKARA-PAYMENT ACCOUNT'**

Account No.: **0152-79139089-01**

**JOB APPLICATION PROCESSING FEE**

SR. NO.	BASIC SCALE	FEE
01	BS-20	2,000
02	BS-19	1,000
03	BS-18	800
04	BS-11-17	600
05	BS-01-10	300

**For office use**

Mark ✓ against the relevant column:

1. The application is complete. \_\_\_\_\_

2. The application is incomplete as following documents are not attached:

(i) \_\_\_\_\_

(ii) \_\_\_\_\_

(iii) \_\_\_\_\_

(iv) \_\_\_\_\_

3. The application is accepted/provisionally accepted subject to supply of the following documents:

(i) \_\_\_\_\_

(ii) \_\_\_\_\_

(iii) \_\_\_\_\_

4. The application is rejected:

Reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Checked by:  
Name of the officer \_\_\_\_\_  
Signature

Verified by:  
Name of the officer \_\_\_\_\_  
Signature

Registrar's Signature:  
University of Okara.