



**UNIVERSITY OF POONCH RAWALAKOT**

Note: Please Mark / Fill information as applicable

STAMP

Post Applied For:	Department:
-------------------	-------------

**1) Personal Information**

Name:											
Father's Name:											
Gender: (Please Tick)	Male		Female								
Date of Birth: (DD-MM-YYYY)	Domicile:										
Present Address											
Permanent Address:											
E-Mail:							Cell #:				
CNIC #:											

PHOTO

**(2) Academic Background/Professional Training**

(Attach Attested Photocopies, Please Start from highest qualification and go in descending order)

Degree Held	Year of Award	Field	Institution	Grade/Div

**(3) Employment History** (Please Start from most recent Job and go in descending order)

Name of Organization	Post held with Pay Scale	Job Profile	Period	
			From	To

**(4) Route of Application** (Please Tick)

Through Proper Channel

Direct to UPR

**(5) References**

Provide Two Academic/Professional References

Reference No. 1 Name \_\_\_\_\_ Position \_\_\_\_\_

Address: \_\_\_\_\_ Phone No. \_\_\_\_\_

Reference No. 2 Name \_\_\_\_\_ Position \_\_\_\_\_

Address: \_\_\_\_\_ Phone No. \_\_\_\_\_

By signing below and submitting this application form I, \_\_\_\_\_ confirm that the information I have provided is accurate to the best of my knowledge and that I authorized you to contact the references provided above for further information.

Dated \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

**(6) Certified from the Employer**

Certified that Mr./Ms. \_\_\_\_\_ is selected for the post, he/she will be relieved in order to enable him/her to join the post in the University of Poonch Rawalakot.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Date \_\_\_\_\_

Official Seal: \_\_\_\_\_

**FOR OFFICE USE**

Application Received by: \_\_\_\_\_ Dated \_\_\_\_\_

Checked by: \_\_\_\_\_ Dated \_\_\_\_\_

Short Listed  Not Short Listed  If not, reason(s) \_\_\_\_\_

Signature & Name of Dealing Officer \_\_\_\_\_ Date \_\_\_\_\_

**ADDRESS SLIP (TO BE FILLED BY CANDIDATE)**

Name of Applicant: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact No. \_\_\_\_\_

**ADDRESS SLIP (TO BE FILLED BY CANDIDATE)**

Name of Applicant: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

Contact No. \_\_\_\_\_

**ADDRESS SLIP (TO BE FILLED BY CANDIDATE)**

Name of Applicant: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

Contact No. \_\_\_\_\_

**ADDRESS SLIP (TO BE FILLED BY CANDIDATE)**

Name of Applicant: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

Contact No. \_\_\_\_\_

