

OPF GIRLS COLLEGE

Block-C Satellite Town, Rawalpindi

Job Application Form

Form N	0
(for Office Use	e Only)

Contract To Comp	eacher	Cont	ract Tead inglish		Contract Teacher Physics	Direc	tor Physical ation
Laboratory A	Attendant						
Note: All data fie	lds are requ	ıired. Fill your	r applicatio	n form	carefully.		
2. PERSONA	AL INFORM	ATION: -					
Full Name (Bloc	k Letters):						
Father's Name ((Block Lette	ers):					Photo
Date of Birth:		Age:_			Religion:		1x1
CNIC#:			G	ender:	Domicile:		
Marital Status:	Married	Unmarrie	ed W	idow	Other:Nat	tionality:	
		_		•			
Phone No:		Mobi	ile No:		Email:		
Postal Address:							
Permanent Add	ress:						
3. QUALIFI	CATION D	ETAILS:- (No	o te: In case	of incom	plete information, Your application v	will be declined)	
Degree/ Certificate	Name of Degree/ Certificate	Major Subjects	Passing Year	% age	Board/University	IBCC/HEC Verification No	IBCC/ HEC Date
SSC/O-Level (10 Years)							
Intermediate/ DAE/A-Level (12/13 Years)							
Bachelor (14 Years)							
Bachelor/Master (16 Years)							
B.Ed							
M.Ed							
M.Phil/MS (18 Years)							
P.hd (20 Years)							

•	From	То	Organization/Institute	Total Period o
Designation From			Organization, Inducate	Experience
rand Total Job Exp	erience: Days/	Month/Years		
NON-TEACHIN	IG EXPERIENC	E INFORMATION	(Note: Only Non-Teaching Staff filled this field):-	
Designation	From	From To Organization/Institute	Organization/Institute	Total Period o
				Experience
rand Total Job Exp	erience: Days/	Month/Years		
UNDERTAKIN	G BY THE APPL	CANT:-		
			/of	hereby certif
				<u></u>
at information cive	n in this form	is absolutely tru	e. Any information found false, may tre	eated as breach
at illioilliation give		•	•	Jacoa ao Di caci
_	able for cance	llation of my app	olication. It is certified that I have caref	
ust and I shall be li		, , ,	olication. It is certified that I have caref ents/column that I have filled up.	
ust and I shall be li		, , ,	olication. It is certified that I have carefents/column that I have filled up.	
ust and I shall be lind personally filled i		tand all the conte	ents/column that I have filled up.	ully read the fo
ust and I shall be li		tand all the conte	ents/column that I have filled up.	ully read the fo
ust and I shall be lind personally filled in Date	t and I unders ———	tand all the conte	ression (Left Hand) App	ully read the fo
ust and I shall be lind personally filled in Date	t and I unders CHECK LIST:	Thumb Imp	ents/column that I have filled up.	ully read the fo
Date DOCUMENT be declined) Tick	t and I unders CHECK LIST: k if attached	Thumb Imp	ression (Left Hand) App	ully read the fo
Date DOCUMENT be declined) Tick	t and I unders CHECK LIST:	Thumb Imp	ression (Left Hand) App	ully read the fo
Date DOCUMENT be declined) Tick Attache	t and I unders CHECK LIST: k if attached aph is attached. d copies of Educ	Thumb Imp (Note:- Following doc /selected:	ression (Left Hand) App uments must be attached with application form otherwaltested form Gazetted Officer and verified	ully read the fo
Date DOCUMENT be declined) Tick Attached from IBG	t and I unders CHECK LIST: k if attached aph is attached. d copies of Educ	Thumb Imp (Note:- Following doc /selected: ational Documents Intermediate & Higher	ression (Left Hand) App uments must be attached with application form otherwaltested form Gazetted Officer and verified	ully read the fo
Date DOCUMENT be declined) Tick Attached from IBC Attested	CHECK LIST: k if attached raph is attached. d copies of Educ	Thumb Imp (Note:- Following doc /selected: ational Documents Intermediate & Higher ence certificate.	ression (Left Hand) App uments must be attached with application form otherwaltested form Gazetted Officer and verified	licant Signatur wise your application Photo
Date DOCUMENT be declined) Tick Attache from IBG Attested Attested	CHECK LIST: k if attached aph is attached. d copies of Educ CC & HEC. (Matric, d copy of Experied	Thumb Imp (Note:- Following doc / selected: ational Documents Intermediate & Higher Ince certificate. e & CNIC.	ression (Left Hand) App uments must be attached with application form otherwaltested form Gazetted Officer and verified	licant Signature wise your application Photo
Date DOCUMENT be declined) Tick Attache from IBG Attested Attested	CHECK LIST: k if attached raph is attached. d copies of Educ CC & HEC. (Matric, d copy of Experied copy of Domicil	Thumb Imp (Note:- Following doc / selected: ational Documents Intermediate & Higher Ince certificate. e & CNIC.	ression (Left Hand) App uments must be attached with application form others attested form Gazetted Officer and verified Degrees)	licant Signature wise your application Photo

Without photographs & required documents your application form will not be entertained

Incomplete form will not be entertained, (All the fields are mandatory/required)