UNIVERSITY OF BALOCHISTAN, QUETTA

Employment Form for Business Incubation Center (BIC-UoB) Posts (Project Positions)

100	Conton	DIC COD	J L OBEB	110	cct i obi	Paste 4 Recent
ISO 9001:2008 Cer	tified					 Photographs
Post Applied For	:					
INSTRUCTIONS	 S:					

- 1) Application form shall be issued on receipt of **Bank Demand Draft (Bank Alfalah)** Account Name: University of Balochistan (Business Incubation Cen), Account No: PK16ALFH0060001009495916 of Rs. 2000/- (Non-Refundable) as a cost of the application form processing Fee.
- 2) Complete application along with required documents can be submitted in the Room No. 26, 1st Floor, Administration Block, Office of Research Innovation and Commercialization (ORIC), University of Balochistan, Sariab Road, Quetta. Persons already employed should submit their forms through proper channel.
- 3) Please answer each question clearly and completely. Before submitting this form ensure that it is completed, and the required documents are enclosed. Failure to do so will render the application liable to summary rejection.
- 4) Attach copies of all testimonials attested by the Gazetted Officer 17 or above.
- 5) Candidates will have to appear for interview at their own cost and without any obligation to the University.

SECTION-01

(PERSONAL INFORMATION)

Note: Please	e Fui Au I	Data with	Biock Letters

1)	Name (According to	C.N.I.C / Passpor	t):				
2)	Father's Name (According to C.N.I.C / Passport):						
3)	C.N.I.C No:4) Date of Birth (dddd, dd-mmmm-yyyy):						
5)	Mother's Tongue:	6)	Religio	n:	_7) Place of	f Birth:	
8)	Postal Address (For G	Correspondence):					
9)	Permanent Address:						
10)	Home Tel:	11) Cell No:		12) E-M	ail Address:		
13)	Marital Status:	Married	Single	14) Local / Dom	nicile:	Local	Domicile
15	Place of Local / Dom	icile:					

SECTION-02

(ACADEMIC RECORD)

Note: Start with the most recent Qualification attained

S-No	Name of Institution	Degree Name	Passing Year	Division / Grade	C.G.P.A (If Any)	Any Position
1						
2						
3						
4						
5						
6						
7						_
8						

(JOB EXPERIENCE)

Note: Start with your present post, put in reverse order of employment during the last ten years and any significant experience not included in that which you believe will be helpful in evaluating record

1. Job Title						
Manahlar Day	In Number					
Monthly Pay	In Words					
Employer / Department	Main Department		Total Service			
Employer / Department	Sub Department		Total Service			
Core Responsibilities						
2. Job Title						
Monthly Pay	In Number					
монину гау	In Words					
Employer / Department	Main Department		Total Service			
Employer / Department	Sub Department		Total Service			
Core Responsibilities						
3. Job Title						
Monthly Pay	In Number					
Withing 1 ay	In Words					
Employer / Department	Main Department		Total Service			
Employer / Department	Sub Department		Total Service			
Core Responsibilities						
4. Job Title	4. Job Title					
Monthly Pay	In Number					
монину гау	In Words					
Employer / Department	Main Department		Total Service			
Employer / Department	Sub Department		Total Bervice			
Core Responsibilities						

SIGNATURE