APPLICATION FORM (Muzaffargarh & DG Khan)



DIRECTORATE GENERAL SOCIAL WELFARE & BAIT UL MAL, PUNJAB



Reg No: _

Eligibility Criteria:

A. Is your age according to the prescri	oed age limit for the desired	I post? Yes	☐ No	PASTE YOUR RECENT
B. Do you have requisite Qualification Advertisement?	& Experience as mentioned	in Yes	☐ No	PASSPORT SIZE
C. Is your Domicile according to the de Advertisement?	esired post as mentioned in	Yes	□ No	COLOR
If your reply is "Yes" to A, B &C above, only	then please proceed further. O	therwise you are not	eligible to apply.	PHOTOGRAPH WITH
01.Bank Online Deposit of Re	s: 81/- from Designated	l Bank Branches	5.	GUM
*Note: Application form will not be ento	ertained without original depos	sit slip (ATS Copy)	<u>'</u>	
Bank Code		Deposit Date		
02. Desired Post: Fill out the boxes	against the posts you want to	apply. Deposit Rs.81 ,	/- against each po	st you want to apply.
01. Warden (BPS-11)	02. Junior Clerk (BPS	6-11)		
03. Desired Test City: Fill only of	ne box (Mandatory).			
01. Rawalpindi	02. Lahore		03. 🗆	Multan
04. Domicile Province 05. Personal Information: us		micile District		
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01. Name in Full:	e CAPITAL letters and leave sp.	aces between words.		
	e CAPITAL letters and leave sp.	aces between words.		
01. Name in Full:	e CAPITAL letters and leave sp.	aces between words.		
01. Name in Full: 02. Father's Name:	e CAPITAL letters and leave sp.		any disability?	Yes No
01. Name in Full: 02. Father's Name: 03. Candidate CNIC #:		O5. Have you	any disability?	Yes No
01. Name in Full: 02. Father's Name: 03. Candidate CNIC #: 04. Gender: Male	Female	O5. Have you	any disability?	
01. Name in Full: 02. Father's Name: 03. Candidate CNIC #: 04. Gender: Male D D 06. Date of Birth: 08. Postal Address:	Female	05. Have you	any disability?	
01. Name in Full: 02. Father's Name: 03. Candidate CNIC #: 04. Gender: Male D D 06. Date of Birth: 08. Postal Address:	Female M M Y City	05. Have you	any disability?	
01. Name in Full: 02. Father's Name: 03. Candidate CNIC #: 04. Gender: Male D D 06. Date of Birth: 08. Postal Address:	Female	05. Have you	any disability?	

06. Academic Information:

Note: 1. ATS will not issue Roll No Slips to those who have not filled in their academic record properly.

- 2. Candidate should convert their grades into marks.
- 3. Write exact degree name & major subject mentioned in certificate/ transcript.

Certificate/ Degree Name	Degree Title	Major Subjects	Year Passing	Obtained Marks/CGPA	Grade	Total Marks/ CGPA	Board/ University
Matric (10 Years)							
Intermediate (12 Years)							
Bachelor (14 Years)							
Bachelor (Hons)/ Master (16 Years)							
Diploma							
Others							

07. Emplo	yment	Record	:
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Sr.	Organization/ Employer Name	Job Title	<u>Dura</u>	<u>tion</u>
No			From	То
01				
02				

08. Total Job Experience:	PASTE YOUR RECENT PASSPORT SIZE
09. CNIC No:	COLOR PHOTOGRAPH WITH
10. Mobile No: (Same as mentioned above)	GUM

12. Undertaking by the applicant:

I	ue to the best of my knowledge and be smissed or removed from Govt service onomous or state enterprise. If any w	the additional particulars/documents/ belief and nothing has been concealed. e under any provincial, federal vrong or incorrect information is found
Date:	Signature of the candidate:	

Instructions:

- Fill the application form properly with complete and correct information.
- Do not leave any field blank, otherwise your application shall be rejected.
- Incorrect, false or forged information may result in cancellation of your candidature at any stage.
- Attach two recent passport size photograph & attested copy of CNIC.
- By hand submission of application form is not allowed.
- Test fee is non-refundable and non-transferable.
 - ❖ Last Date of the submission of Application Form is **Monday**, **06**TH **Dec**, **2021**.
 - Application Form should reach ATS office latest by last date of submission of Application form.
 - * ATS will not be responsible for late receiving of application through courier/ Pakistan post etc.

Help Line:

Ph: 051-2153577-9

Website: www.ats.org.pk
Email: info@ats.org.pk

Please Send Application Forms

(Only through courier or Pakistan Post within due date)

Manager Operations
(Project: DGSW2-PUN)
Allied Testing Services (ATS)
171-G, Street # 36, F-10/1, Islamabad



Allied Testing Services BANK COPY Directorate General Social Welfare, Govt of Punjab Branch Name

	le	Branch Name	Date	
		ONLINE DEPOSIT SLIP		
		Please deposit fee in only one bank and tick the relevan	t bank)	
	ABIB BANK	BANK AL HABIB LIMITED بينك الحبيب لميثلاً		Amount in Words: Eighty One Rupees
A/C Title: Allied Te		A/C Title: Allied Testing Services	Test Processing Fee: 81/-	Only.
A/C No: 50127000	272400400000000	A/C No: 00150981013676011		Non Refundable/ Non Transferable
Note: Bank Service Charg Desired bank stamp is re		Note: Bank Service Charges: Free of Cost Desired bank stamp is required on the	Total: 81/-	Transferable
deposit slip (ATS Copy) a		deposit slip (ATS Copy) along Application		
Form to ATS Office.		Form to ATS Office.		
Project Id:	DGS	W-PUN		
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Guardian's Name:	o e	Co.		
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Branch Cod	le	Branch Name	Date	
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Project Id:	DGS/	W-PUN		
8	DGS	W-PUN	Applicant Signature	Cashier
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Applicant's Name: Guardian's Name:	DG	w-run	Applicant Signature Office	
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