

## **APPLICATION FORM**

درخواست فارم

### **FOR**

**RECENT PHOTO** حاليہ تصوير پیسٹ کریں

**PASTE** 

### Forestry, Environment & Wildlife DFO Kaghan (FEW-DFOK) (494)

| CANDIDATE'S PERSONAL DATA امیدوار کی ذاتی معلومات<br>(Application Form with incomplete personal data or information will not be entertained)                                                                  |         |        |          |          |                      |         |           |            |                |              |          |          |    |    |                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------|----------|----------------------|---------|-----------|------------|----------------|--------------|----------|----------|----|----|-----------------------|
|                                                                                                                                                                                                               | 1       | (App   | lication | Form Wit | n incom              | piete p | ersonai c | lata or in | itormatic      | on Will no   | ot be en | ertained | 1) |    |                       |
| 1.<br>FULL NAME<br>پورا نام                                                                                                                                                                                   |         |        |          |          |                      |         |           |            |                |              |          |          | A  | В  | C                     |
| Write all in<br>CAPITAL                                                                                                                                                                                       |         |        |          |          |                      |         |           |            |                |              |          |          |    |    |                       |
| 2.<br>FATHER's                                                                                                                                                                                                |         |        |          |          |                      |         |           |            |                |              |          |          | X  | Y  | Z                     |
| NAME<br>والدكا نام<br>Write all in                                                                                                                                                                            |         |        |          |          |                      |         |           |            |                |              |          |          |    |    |                       |
| 3. GENDER<br>جنس                                                                                                                                                                                              | MALE _  | FEM    | ALE      |          | OF BIRTH<br>پیدانش ک | d       | d         | •          | m              | m            | •        | У        | У  | У  | У                     |
|                                                                                                                                                                                                               |         | 1      |          | 1        |                      |         |           | T          |                |              |          |          | T  |    | 1                     |
| 5. CNIC<br>NUMBER<br>قومی شناختی کارڈ نمبر                                                                                                                                                                    |         |        |          |          |                      | -       |           |            |                |              |          |          |    |    |                       |
| 6. CNIC<br>NUMBER<br>Re-enter                                                                                                                                                                                 |         |        |          |          |                      | -       |           |            |                |              |          |          |    |    |                       |
|                                                                                                                                                                                                               |         |        |          |          |                      |         |           |            |                |              |          |          |    |    |                       |
| 7. MOBILE<br>NUMBER 1<br>موبائل فون كاتمبر                                                                                                                                                                    | (+9     | 92)    | 0        | 3        |                      |         | -         |            |                |              |          |          |    |    | Primary               |
| 8. MOBILE<br>NUMBER 2<br>موبائل فون كانمبر                                                                                                                                                                    | (+9     | 92)    | 0        |          |                      |         | _         |            |                |              |          |          |    |    | Secondary<br>(If any) |
| موبان فون خانمبر                                                                                                                                                                                              |         |        |          |          |                      |         |           |            |                |              |          |          |    |    |                       |
| 9. E-MAIL<br>ADDRESS                                                                                                                                                                                          |         |        |          |          |                      |         |           | 0          |                |              |          |          |    |    |                       |
| 10. PRESENT<br>ADDRESS<br>Write all in CAPITAL<br>موجودہ پتہ                                                                                                                                                  |         |        |          |          |                      |         |           |            |                |              |          |          |    |    |                       |
|                                                                                                                                                                                                               |         |        |          |          |                      |         |           |            |                |              |          |          |    |    |                       |
| 11. DOMICILE PROVINCE DISTRICT ربائش گاه کا ضلع                                                                                                                                                               |         |        |          |          |                      |         |           |            |                |              |          |          |    |    |                       |
| 13. RELIGIO                                                                                                                                                                                                   | مذہب ON | MUSLII | VI       |          | NON MU               |         | П         |            | ISABLITY       |              |          | YES      | 7  | NO |                       |
|                                                                                                                                                                                                               |         | مسلم   |          |          | یر مسلم              | ie –    |           | (Please at | tach Medical ( | Sertificate) |          |          |    |    | Ш                     |
| 15. CURRENT OCCUPATION (Please attach signed/ stamped NOC)  GOVERNMENT SERVANT (Please attach signed/ stamped NOC)  PRIVATE SERVICE (Please Attach Experience/job Letter)  IF JOBLESS  IF JOBLESS  IF JOBLESS |         |        |          |          |                      |         |           |            |                |              |          |          |    |    |                       |
|                                                                                                                                                                                                               |         |        |          |          |                      |         |           |            |                |              |          |          |    |    |                       |
|                                                                                                                                                                                                               |         |        |          | A. POS   | T SELI               | ECTE    | O / APP   | LIED       | منتخب کے       | ك / پوسٹ     | پوسٹ     |          |    |    |                       |
|                                                                                                                                                                                                               |         |        | 04       | _        |                      | _ 4     | <b>^</b>  |            |                |              |          |          |    |    |                       |
| 01. Forest Guard (BPS-08)                                                                                                                                                                                     |         |        |          |          |                      |         |           |            |                |              |          |          |    |    |                       |

Please do not damage this form by folding it and complete it with CAPITAL letters

# براہ کرم اس فارم کو فولڈ کرکے ڈیمج نہ کریں، اور بڑے لیٹرز کے ساتھ مکمل کریں FOR





| D. DESIRED TEST CENTER<br>(PTS will decide your final test center)(Please mark only one box برائے مہربائی صرف ایک باکس منتخب کریں) |                                             |              |            |         |                       |      |          |                                    |  |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|--------------|------------|---------|-----------------------|------|----------|------------------------------------|--|
|                                                                                                                                    | Manshera                                    |              | ]          |         |                       | Kag  | han      |                                    |  |
|                                                                                                                                    |                                             |              |            |         |                       |      |          | "*"Subject to number of candidates |  |
| D1. SPECIAL INSTRUCTIONS FROM DEPARTMENT OR ORGANIZATION                                                                           |                                             |              |            |         |                       |      |          |                                    |  |
| Required Physical Qualification                                                                                                    |                                             |              |            |         |                       |      |          |                                    |  |
| i) Health The candidate shall be free from all physical and mental disabilties.                                                    |                                             |              |            |         |                       |      |          |                                    |  |
| ii) Height<br>5 feet- 6 inch                                                                                                       | ii) Height<br>5 feet- 6 inches (Minimum).   |              |            |         |                       |      |          |                                    |  |
|                                                                                                                                    | iii) Chest Size 32-34 inches (Minimum); and |              |            |         |                       |      |          |                                    |  |
| iv) Marathom Race Candidate shall qualify Marathon race of 03km within 12 minutes.                                                 |                                             |              |            |         |                       |      |          |                                    |  |
| F. ACADEMIC / QUALIFICATION SELECTION DATA<br>(براہ کرم مکمل طور پر اور مناسب طریقے سے بھریں Please complete it properly)          |                                             |              |            |         |                       |      |          |                                    |  |
| Certificate<br>/Degree Level                                                                                                       | Degree or Certificate Title                 | Year Passing | Obtained I | Marks / | Total Marks /<br>CGPA | %age | Division | Institute/Board/University         |  |
| SSC / Matric<br>O-Level<br>(10 Years)                                                                                              |                                             |              |            |         |                       |      |          |                                    |  |
| HSSC / DAE /<br>A-Level<br>(12 Years +)                                                                                            |                                             |              |            |         |                       |      |          |                                    |  |
| Bachelors<br>(14 Years)                                                                                                            |                                             |              |            |         |                       |      |          |                                    |  |
| Bachelors/BS<br>(16 years)                                                                                                         |                                             |              |            |         |                       |      |          |                                    |  |
| Masters<br>(16+ years)                                                                                                             |                                             |              |            |         |                       |      |          |                                    |  |
| M-Phil/MS                                                                                                                          |                                             |              |            |         |                       |      |          |                                    |  |
| Ph.D.                                                                                                                              |                                             |              |            |         | -                     |      |          |                                    |  |
|                                                                                                                                    |                                             |              |            |         |                       |      |          |                                    |  |

|       | H. JOB / PROFESSIONAL EXPERIENCE DATA (Please complete it properly براه کرم مکمل طور پر اور مناسب طریقے سے بهریں) |                       |                       |                 |            |  |  |  |  |
|-------|-------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------|-----------------|------------|--|--|--|--|
| S.No# | Organization / Employer Name                                                                                      | Position (Working as) | Job D<br>Write only M | Total Period Of |            |  |  |  |  |
|       | - 3                                                                                                               | 3,                    | From                  | То              | Experience |  |  |  |  |
| 1     |                                                                                                                   |                       |                       |                 |            |  |  |  |  |
| 2     |                                                                                                                   |                       |                       |                 |            |  |  |  |  |
| 3     |                                                                                                                   |                       |                       |                 |            |  |  |  |  |

If more (experience or qualification) to mentioned, kindly attached another page 3A, next to page 3 & sign.

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(FEW-DFOK) (494)

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### **PAKISTAN TESTING SERVICE**



#### **GENERAL INSTRUCTIONS**

| GENERAL INSTRUCTIONS FOR APPLICATION FORM TESTING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | CHECK LIST                                                                        |  |  |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|--|--|--|--|--|--|
| Please fill this form as per instructions give below:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | I have signed & thumb my application form.                                        |  |  |  |  |  |  |
| Please fill this form as per instructions give below:  Application form is free of charge and it's not for sale.  Application form which is incomplete or submitted by hand will not be entertained.  Application form which is incomplete or submitted by hand will not be entertained.  Application form which is incomplete or submitted by hand will not be entertained.  Application form which is incomplete or submitted application.  Candidates must attach clear photocopy of their CNIC (NADRA).  Computer literacy is a must for all position except support staff.  Applications carrying incorrect information shall be instantly rejected.  Candidate should bring their original testimonials at the time of interview.  Original signed letter from your employer stating name, position, salary, duration of employment, address and contact numbers of employer if already in job or jobbless.  Candidates should also attach photocopies of all supporting documents if required or mentioned in the advertisement {e.g. (\$SC/Intermediate certificates recognized by board),(Degrees recognized by HEC), Domicile, Local Certificate or NOC etc.} in A4-sized (8.27" x 11.69")  Candidature could be determined on the basis of applicants' personal data, domicile, qualification, professional experience and performance in test/s to be conducted by P.T.S.  No TA / DA would be admissible for test/interview. However, test & interview is devised by the employer within their legal criteria & policy. Hence, only shortlisted candidates will be intimated for test, exam or interview.  Please make sure that if any other person attempts to take the test, exam or interview in your place, both you and such person will be liable to prosecution. And details relating to the situation will be forwarded to the relevant employer and appropriate regulatory authorities.  In case of any bogus/ false information or criminal record, selection shall stand withdrawn/cancelled immediately.  Disabled persons, females, orphans, minorities or non-Muslims are encouraged to apply.  Emp |                                                                                   |  |  |  |  |  |  |
| UNDERTAKING BY THE CANDIDATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                   |  |  |  |  |  |  |
| By signing below and submitting this Form, I s/d/w of do hereby declares that I have read General Instructions and the information I am providing in this form is accurate & true to my knowledge. In case of any information comprise herein found at any stage to be conceal, missing, untrue, false or forged, my candidature can be cancelled at any stage (even after employment, if so revealed later), and I shall be liable to any legal action against me. And I am using P.T.S. as Service Provider only so P.T.S. will not stand liable for what I have signed in this form & result I obtain in after selection or test.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                   |  |  |  |  |  |  |
| Date & Left Thumb Impression                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Candidate's Signature                                                             |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | BY POST MAIL                                                                      |  |  |  |  |  |  |
| HELP LINE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | To,                                                                               |  |  |  |  |  |  |
| <b>↓</b> ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                   |  |  |  |  |  |  |
| 051 111 111 787 <b>X</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | PAKISTAN TESTING SERVICE                                                          |  |  |  |  |  |  |
| http://www.pts.org.pk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | PTS Head Quarter, 3rd Floor, Adeel Plaza, Fazal-e-Haq Road, Blue Area, ISLAMABAD. |  |  |  |  |  |  |

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(FEW-DFOK) (494)

| 5                                                                                                                                                                                               |                                                                        | on, mark checker box and a                                                                                                         | nttach pro<br>Bai        |                     | t. Project Code <b>(494)</b>           |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------|----------------------------------------|--|--|
|                                                                                                                                                                                                 | Bank Deposit Slip (PTS Copy)                                           | Branch Name:                                                                                                                       |                          |                     |                                        |  |  |
| PTS For                                                                                                                                                                                         | estry, Environment & Wildlife DFO<br>Kaghan (FEW-DFOK) (494)           | Branch Code: Payment Date:                                                                                                         |                          |                     |                                        |  |  |
| A/C Title: Pa                                                                                                                                                                                   | abib Bank Limited kistan Testing Service (Pvt) Ltd-MCA                 | United Bank Limited  A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA                                                             |                          |                     |                                        |  |  |
|                                                                                                                                                                                                 | umber: 0042-79916572-03                                                | UBL A/C Number: 225701041 with deposit Slip. 2. Send Original Deposit Slip (PTS Copy) & application to PTS Office within due date. |                          |                     |                                        |  |  |
| Applicant Full Name                                                                                                                                                                             | Bank Charges Or/lf/Any Other<br>Applicable Charges                     | 20-                                                                                                                                | Amount in Twenty         |                     |                                        |  |  |
| Father's Name                                                                                                                                                                                   |                                                                        | Test Fee                                                                                                                           | 350-                     | Amount in words PKR | Three hundred & fiftyRupees Only       |  |  |
| Mobile Number                                                                                                                                                                                   |                                                                        | Deposited Amount                                                                                                                   |                          | PK                  | R 370-                                 |  |  |
| CNIC Number<br>(FRC, CRC or PV#)                                                                                                                                                                |                                                                        |                                                                                                                                    | 370- Amount in words PKR |                     | Three hundred &<br>Seventy Rupees only |  |  |
| Post/Position Applied<br>(Only for One Position)                                                                                                                                                | 01. Forest Guard (BPS-08)                                              | Applicant's Sign                                                                                                                   | ature                    |                     | Cashier's Stamp                        |  |  |
|                                                                                                                                                                                                 |                                                                        | O O                                                                                                                                | <u></u>                  |                     | ······                                 |  |  |
| _ / E                                                                                                                                                                                           | Bank Deposit Slip (Bank Copy)                                          | Branch Name:                                                                                                                       |                          |                     |                                        |  |  |
| For                                                                                                                                                                                             | estry, Environment & Wildlife DFO<br>Kaghan (FEW-DFOK) (494)           | Branch Code: Payment Date:                                                                                                         |                          |                     |                                        |  |  |
| Habib Bank Limited  A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA  Habib Bank Limited  A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA  A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA |                                                                        |                                                                                                                                    |                          |                     |                                        |  |  |
| HBL A/C N                                                                                                                                                                                       | umber: 0042-79916572-03                                                | UBL A/C Number: 225701041                                                                                                          |                          |                     |                                        |  |  |
| Please note: 1. Desired Ba                                                                                                                                                                      | ank Stamp is required on the Deposit Slip or attach electronic receipt | with deposit Slip. 2. Send Original Dep                                                                                            | oosit Slip (PTS          |                     |                                        |  |  |
| Applicant Full Name                                                                                                                                                                             |                                                                        | Bank Charges Or/lf/Any Other<br>Applicable Charges                                                                                 | 20-                      | Amount in words PKR | Twenty<br>Rupees Only                  |  |  |
| Father's Name                                                                                                                                                                                   |                                                                        | Test Fee                                                                                                                           | 350-                     | Amount in words PKR | Three hundred<br>& fiftyRupees Only    |  |  |
| Mobile Number                                                                                                                                                                                   |                                                                        | Deposited Amount                                                                                                                   | PKR 370-                 |                     |                                        |  |  |
| CNIC Number<br>(FRC, CRC or PV#)                                                                                                                                                                |                                                                        |                                                                                                                                    | 370-                     | Amount in words PKR | Three hundred &<br>Seventy Rupees only |  |  |
| Post/Position Applied<br>(Only for One Position)                                                                                                                                                | 01. Forest Guard (BPS-08)                                              | Applicant's Signature Cashier's Sta                                                                                                |                          |                     | Cashier's Stamp                        |  |  |
| f payment made through following transaction, mark checker box and attach proof of payment.  Online Mobile Paisa Bank                                                                           |                                                                        |                                                                                                                                    |                          |                     |                                        |  |  |
|                                                                                                                                                                                                 |                                                                        |                                                                                                                                    |                          |                     |                                        |  |  |