GOVERNMENT OF PAKISTAN MINISTRY OF MARITIME AFFAIRS (8th FLOOR, KOHSAR BLOCK, PAK. SECRETARIAT)

APPLICATION FORM

Name of Post applied for:			
Name of Applicant:		_	
Father's Name:		_	
Date of birth:			
Gender:	Religion:		
CNIC No.:			
Domicile:			
Postal Address:		_	
Permanent Address:		_	
Phone No	Mobile No		
Email address:		_	
Academic Qualification:		-	
Experience:			

Name of Post	Department	From	То

I confirm that all the information given by me on this form is correct and accurate and I understand that if any of the information I have provided is later found to be false or misleading, any offer of employment may be withdrawn or employment terminated.

Signature of the Candidate_____

Date_____