



UNIVERSITY OF OKARA

2- KM Main Multan Road, Renala Khurd Bypass, Okara

JOB APPLICATION FORM (For Academics Position)

Affix one
recent
Passport size
photograph

Job Applied For:				Sr. #	
Special Quota (if any) Please tick relevant Box:	Disabled		Women		Minorities
Reference of Bank Draft # / Challan Form					

1. Personal Information

Name: Mr./Mrs./Miss (in block letters)										
Father/Husband's Name: (in block letters)										
Postal Address:										
Personal Mobile/Telephone Number:										
Emergency Contact Number: (at least two mobile/phone numbers, other than personal number in case of emergency communication of information)										
Email Address:										
Date of Birth:	Day	Month	Year	Age On closing date of Ad			Years	Months	Days	
C.N.I.C. No:										
Marital Status:	Married				Unmarried					
Gender:	Male				Female:					

Receipt

Received by: Name _____ Signature _____

Diary No.: _____ Date: _____

2. EDUCATIONAL QUALIFICATIONS (in chronological order)

Certificate/ Degree	Major Subjects	Institution	Passing year	Marks / CGPA		Percentage / CGPA
				Obtained	Maximum	
Matric						
FSc/FA						
BSc/BA						
MSc/MA/ BBA (Hons.)						
MPhil/MS						
PhD						
Other specialized training						

3. KIND OF AVAILED LEAVES

A: Study Leaves (Required copies enclosed, if applicable)

Sr. No.	Study leave (i.e. MPhil, PhD, Post Doc. etc.)	Duration						Total Length of availed Leaves		
		From			To					
		D	M	Y	D	M	Y	D	M	Y
1.										
2.										
Total Leaves										

B. Other leaves (i.e. Leave, EL, EOL, ML etc.) (Required copies enclosed, if applicable)		Duration						Total Length of availed Leaves		
		From			To					
Sr. No.		D	M	Y	D	M	Y	D	M	Y
1.										
2.										
Total Leaves										

4. WORK PERFORMED EXPERIENCE.

Organization	Position held/major duties	Duration						Total Experience		
		From			To					
		D	M	Y	D	M	Y	D	M	Y
Total Experience										

4. PUBLICATIONS (Research publications in HEC / PEC recognized journals). Attach a separate list of publications if the given space is insufficient.

5. DISTINCTIONS/AWARDS IN THE PRESCRIBED QUALIFICATION (IF ANY)

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6. REFERENCES

1.	
2.	
3.	

UNIVERSITY OF OKARA

CERTIFICATE OF DEPARTMENTAL PERMISSION

To be submitted by the candidate who is in govt./semi govt./autonomous body service with the application form duly completed and attested by the concerned Registrar/Head, failing which the application shall be rejected.

1. The following should be filled in by the candidate: -

a. Name:

b. Father's Name:

c. Post held presently:

d. Office / Department:

e. Post applied for:

f. Advertisement dated:

Dated: _____

Signature of the Candidate _____

2. (This portion should be filled in by the Department / Office.)

The above candidate has been permitted by this Office / Department to apply for the said post and that: -

- a. He has been employed in this Department / Office as _____ (BS-____) since _____.
- b. He holds this post in **permanent/temporary/contract** capacity.
- c. If a Departmental candidate / employee is selected, he / she will be relieved by the parent Department to join the post for which he / she has applied.

SIGNATURE & STAMP

Dated: _____

7. CHECK LIST

Identify documents attached with this application

1. Academics Certificates / Degrees
 - a. Matriculation
 - b. Intermediate
 - c. Bachelor
 - d. Master/BS Hons.
 - e. M. Phil/MS
 - f. Ph.D.
2. CNIC
3. Two passport size photographs
4. Domicile Certificate
5. Experience / Service Certificate/s
6. Certificate/s of Distinction/s
7. Certificate/s of Co-curricular Activities:
8. In case of Govt. service, Departmental Permission Certificate from Appointing Authority.
9. In case of Ex-Serviceman, Discharge Certificate
10. Any other document

8. DECLARATION

I hereby solemnly declare that all the information provided herein is correct to the best of my knowledge and belief.

Date: _____ Candidate's Signature: _____

9. Instructions for submission of Job Application Processing Fee:

Application processing fee may be deposited using any of the following procedures;

1. Prepare a Bank Demand Draft in favour of, 'TREASURER, UNIVERSITY OF OKARA', (NTN: 9021534-6) and attach the original copy with the application form.

OR

2. Deposit the Application Fee in any HBL Branch (Habib Bank Limited) in the following account;

Title of Account: **'TREASURER UO OKARA-PAYMENT ACCOUNT'**

Account No.: **0152-79139089-01**

JOB APPLICATION PROCESSING FEE

SR. NO.	BASIC SCALE	FEE
01	BS-18	1,000

For office use

Mark ✓ against the relevant column:

1. The application is complete. _____

2. The application is incomplete as following documents are not attached:

(i) _____

(ii) _____

(iii) _____

(iv) _____

3. The application is accepted/provisionally accepted subject to supply of the following documents:

(i) _____

(ii) _____

(iii) _____

4. The application is rejected:

Reasons:

Checked by:
Name of the officer _____
Signature _____

Verified by:
Name of the officer _____
Signature _____

Registrar's Signature:
University of Okara.