

(383)

APPLICATION FORM

Prime Minister's Office

BOARD OF INVESTMENT PAKISTAN

Applying for: Lower Division Clerk (BPS-09)

Bank Onlin	ne Deposit (*No	te: Application	n Form will not	be entertaine	d without C	riginal [Deposit Slip.)	
ALFALA (ANY BRA		HBL, (BRANCH)	(ANY B	ABL, RANCH)	Branch Cc	de	 Deposit Date	
Test City: (Tick only one)	 Islamabad Quetta Faisalabad Muzafarabad Sawat 	Lah	nore shawar jranwala hat	Multar D.I. Kh Mirput Mirput Marda	n an r	☐ Ka ☐ Hy ☐ Su ☐ Ba	rachi vderabad kkur Innu	Passport size Recent Photograph Affix with Gum (Latest By 6
Domicile Dist Domicile Province: (Tick only one)	rict: Punjab KPK Azad Jammu	BalocIslam	histan abad Capital 1	,) 🗌 Baltistan	Sindh FATA		y:1 ' y 3p3 1:p

1. Personal Information (In Block Letters)

Name (in Full):		Note: Tick Only One Circle in each Row.
Father's Name:		Religion: OMuslim ONon-Muslim
		Are You Disable? Ores No
CNIC/B-Form:		Gender: OMale OFemale
Age:	Date of Birth (D-м-Y) Marital Status:	Armed Forces: Ores No Only for personnel of Armed Forces of Pakistan
Destal Address		Deceased Servant: OYes ONO
Postal Address:		Deceased Civil Servant wife, son or daughter
		Government Servant: OYes ONO
Phone #:	Cell #:	with Two Years Continuous Experience
		Scheduled Cast /Buddhist: O Yes O No
Email (IF ANY):	(Do not give here Network converted mobile Numbers)	

Degree Title	Major Su	hiects	Year of	Marks	Total	*
		bjeets	Passing (D-M-Y)	Obtained	Marks	Institution Name
${f n}$ (Note: If you need more	e rows to write you	rinformation, yo	ou can add ana	dditional pagew	ith Applicatio	on Form.)
Organization	Name	Desi	gnation	Start Da	ate	End Date
(Name of the Organiza	tion / Dept.)			((D-M-Y))	((D-M-Y))
	Organization	1 (Note: If you need more rows to write your Organization Name (Name of the Organization / Dept.)	Organization NameDesi(Name of the Organization / Dept.)(Your Design	Image: Constraint of the second se	1 (Note: If you need more rows to write yourinformation, you can add anadditional pagew Organization Name Designation (Name of the Organization / Dept.) (Your Designation / Position	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 <tr< td=""></tr<>

4. Undertaking by Applicant

I ______d/s/w of ______do hereby solemnly affirm that I have read and understood the conditions for applying in the above mentioned Post and that I have filled the form as per instructions given above and in the event any information contained herein is found to be untrue, Ishall be liabletodisciplinary action which mayresultin cancellation of my candidatureat any stage.

Signature & Date:	Th	(1 - (- 11):
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bigliature & Date:	i numb impi coolon	(Dert Hund]

Document Check list:

Tick if Attached / selected:

- □ Photograph is Attached
- □ Original bank Deposit Slip is Attached on the back side of Application Form
- □ CNIC Copy is Attached on the back side of Application Form

Instructions:

- ALL DATA FIELDS ARE REQUIRED TO BE FILLED. FILL YOUR APPLICATION FORM CAREFULLY.
- Application Fee (Service Charges) is nonrefundable / nontransferable. Bank Online Deposit of Rs. 500/- must be attached with application form.
- In case of more than one apply use separate application form along with original deposit slip.
- Application must reach OTS office latest by last date of submission of application form.
- OTS will not be responsible for late receiving of application through courier / Pakistan post etc.
- Attach your recent photograph (Latest by 6 Months), CNIC copy, original bank deposit slip with this application form.
- Without Signature & Thumb impression, your application form will not be entertained.
- Without photograph your application form will not be entertained.
- In-complete forms will not be entertained. (All the fields are mandatory / Required)
- In Person/By hand submission of Application form is not allowed.
- Mobile phones or other electronic gadgets are not allowed in test center premises.
- Please visit OTS website according to the test schedule to check your status.

X------

Cut Address box given below and affix it with gum on the envelope.

Send Registration Form to:

Manager Operation, (PMOBOI) Office No 01, Central Avenue, Phase 6, Bahria Town, Islamabad

Help Line: 051-111 687 222 Email: info@ots.org.pk, Website: www.ots.org.pk

Open Testing Service

OTS Copy

ONLINE DEPOSIT SLIP

Please deposit in only one bank & tick the relevant Bank

Open Testing Service 23287106336103

Five Hundred Only

Open Testing Service 0335001004927667

Five Hundred Only

Rs. 500

Rs. 500

Note: Bank Service Charges Free of Cost

Branch Code:

Date:

Branch Name:

Remote Branch: Account Title:

Account Number:

Amount in Figures:

Amount in Words:

A Bank Alfalah Remote Branch:

Account Title:

Account Number:

Amount in Figures:

Amount in Words:

Allied Bank

Remote Branch: Account Title:

Amount in Figures:

Habib Bank Limited Habib Bank Limited, PWD Branch (2328)

Bank Alfalah Limited

Bank Alfalah, PWD Branch (0335)

Allied Bank Limited

ABL Islamic Banking, PWD Branch (5133)

Branch Name:_____

ℜ Branch Code: _____ Date: __/__/

ONLINE DEPOSIT SLIP

Open Testing Service

BANK Copy

Please deposit in only one bank & tick the relevant Bank

HBL навів валк	Habib Bank Limited
Remote Branch:	Habib Bank Limited, PWD Branch (2328)
Account Title:	Open Testing Service
Account Number:	23287106336103
Amount in Figures:	Rs. 500
Amount in Words:	Five Hundred Only
Note: Bank Service C	harges Free of Cost

Å Bank Alfalah	Bank Alfalah Limited
Remote Branch:	Bank Alfalah, PWD Branch (0335)
Account Title:	Open Testing Service
Account Number:	0335001004927667
Amount in Figures:	Rs. 500
Amount in Words:	Five Hundred Only
Note: Bank Service C	harges Free of Cost

Allied Bank	Allied Bank Limited
Remote Branch:	ABL Islamic Banking, PWD Branch (5133)
Account Title:	Open Testing Service
Account Number:	0020050208060021
Amount in Figures:	Rs. 550
Amount in Words:	Five Hundred Fifty Only
Note: Inclusive of Bar	k Service Charges

The Bank Must Return OTS Copy to the Candidate.
Attach CNIC Copy with deposit slip.
Application Form will not be entertained without Original Deposit Slip.
Application Form will not be entertained other than against cash payment.

FBP Endorsement is required on both the Deposit Slip.
 Deposit it in any online country wide branches.

Deposit in any owner commercial water branches.
Cash should always be deposited at the respective counter and electronic computer generated receipt printed through flatbed printer on deposit slip/challan should be obtained before leaving the counter, please be sure to check the receipt and satisfy that complete details including account number and amount deposited are correctly printed failing which the bank will not be received. PCode: 383

Applicant Name: Applicant Father Name CNIC No. / Form B No. Applied For:

Account Title:	Open Testing Service
Account Number:	0020050208060021

Note: Bank Service Charges Free of Cost

Amount in Words: Five Hundred Fifty Only Note: Inclusive of Bank Service Charges

- The Bank Must Return OTS Copy to the Candidate.
 Attach CNIC Copy with deposit slip.
 Application Form will not be entertained without Original Deposit Slip.
 Application Form will not be entertained other than against cash payment.
- FBP Endorsement is required on both the Deposit Slip.

Rs. 550

- FBP Endorsement is required on both the Deposit Stip. Deposit it in any online country wide branches.
 Cash should always be deposited at the respective counter and electronic computer generated receipt printed through flatbed printer on deposit slip/challan should be obtained before leaving the counter, please be sure to check the receipt and satisfy that complete details including account number and amount deposited are correctly printed failing which the bank will not be reaconsible.
- PCode: 383

Applicant Name:	
Applicant Father Name:	
CNIC No. / Form B No.:	
Applied For:	