



3.

4.

5.

6.

7.

### OFFICE OF THE DEAN, KHYBER GIRLS MEDICAL COLLEGE, HAYATABAD PESHAWAR

## Application form for Employment

РНОТО

Post Applied For \_\_\_\_\_

	structions: i. ii. ii. iv. Nore	Peshawar on or before the due date along with. Attested photocopies of certificates, degrees, detail marks certificates, domicile and other relevant documents. Persons already in employment should submit their application forms through proper channel alongwith NOC issued by the competent authority. <u>Incomplete application forms and those received after the due date will not be entertained.</u> Use additional sheets, if required.					r channel led.
1.	Nam	id ni) 91	ock letters)				
2. 3.							
3.	i.		d other particulars: rrespondence (intervie	ew call)			
		Mobile		Ph	. No		
	ii.	Perma	nent Home Address: .				
					N.		
				Ph	. NO		
	iii.	E-Mail	Address	Gei	nder		
	iv.	District	t of Domicile	v. Na	ationality		
	vi.		I Status				
4.			Commencing from				
Sr. No	Certific		Name of Board/ University	Exam. With	Division/ Distinction	Attempt	% Marks Obtained
1.	Degre		University	year of passing			Uplained
2.							
۲.							

### 5. Formal Training or Education:

Sr. No	Name of Institution	Type of Training	Period		Certificate or Diploma obtained
			From	То	-

# 6. Research Papers: Attach list of Research Papers as per specimen and attested photocopy of title journal with research paper.

Sr. No	Title of Research Paper	Name of Journal	Date of Publication	Principal or co-author

Sr. No	Name of Institute	Period	Designation	BPS	Job Description	Nature of Job	
	Organization	From – To			(Teaching/ Research/ Admn)	(Permanent/ Temporary)	

### 7. Employment Record (Starting from the present position):

- 8. Attach List of Miscellaneous Teaching or Administrative Experience, if any.
- **9.** Membership of Learned Societies and other Achievements in the University, Public or International Affairs, if any.
- **10.** Countries Visited:

Sr. No	Name of Country	Duration	Purpose of Visit

#### **11.** References:

i.	 	 
ii		

i.    Bio-data   5	12.	List of	Page No.		
iii.    Intermediate (F. Sc.)      iv.    M.B.B.S/ Equivalent      v.    FCPS/ MRCP/ FRCS/ M.D/ M.S/ M. Phil/ Ph. D      vi.    Detail Marks Sheet (DMC)      vii.    Merit Certificates      viii.    PM&DC Registration Certificate      ix.    Experience Certificates      x.    Domicile Certificates      xi.    C.N.I.C      xii.    Research Papers/ Publications      xiiv.		i.	Bio-data	<u>5</u>	
iv.    M.B.B.S/ Equivalent		ii.	Matric (S.S.C.)	<u>    6          6                     </u>	
v.FCPS/ MRCP/ FRCS/ M.D/ M.S/ M. Phil/ Ph. Dvi.Detail Marks Sheet (DMC)vii.Merit Certificatesviii.PM&DC Registration Certificateix.Experience Certificatesix.Experience Certificatex.Domicile Certificatexi.C.N.I.Cxii.Research Papers/ Publicationsxiiv		iii.			
vi.Detail Marks Sheet (DMC)vii.Merit Certificatesviii.PM&DC Registration Certificateix.Experience Certificatesx.Domicile Certificatexi.C.N.I.Cxii.Research Papers/ Publicationsxiii		iv.	M.B.B.S/ Equivalent		
vii.Merit Certificatesviii.PM&DC Registration Certificateix.Experience Certificatesx.Domicile Certificatexi.C.N.I.Cxii.Research Papers/ Publications		۷.	FCPS/ MRCP/ FRCS/ M.D/ M.S/ M. Phil/ Ph. D		
viii.PM&DC Registration Certificateix.Experience Certificatesx.Domicile Certificatexi.C.N.I.Cxii.Research Papers/ Publicationsxiii		vi.	Detail Marks Sheet (DMC)		
ix.    Experience Certificates		vii.	Merit Certificates		
x.    Domicile Certificate		viii.	PM&DC Registration Certificate		
xi.    C.N.I.C		ix.	Experience Certificates		
xii.    Research Papers/ Publications		х.	Domicile Certificate		
xiii.		xi.	C.N.I.C		
xiv.		xii.	Research Papers/ Publications		
xv.		xiii.			
xvi		xiv.			
xvii		XV.			
		xvi.			
		xvii.			
xviii		xviii.			

I hereby declare that all the entries in this application form, all the additional particulars (if any) furnished alongwith it, are true to the best of my knowledge and belief.

Name & Signature of the Candidate

Dated: \_\_\_/ \_\_\_/ 2024

KYBER GIRLS MEDICAL COLLEGE HAYATABAD PESHAWAR	KHYBER GIRLS MEDICAL COLLEGE HAYATABAD PESHAWAR	KHYBER GIRLS MEDICAL COLLEGE HAYATABAD PESHAWAR
<b>RECEIPT</b> (Attach with application form)	<b>RECEIPT</b> (Candidate Copy)	<b>RECEIPT</b> (Accounts Copy)
S. No:	S. No:	S. No:
NAME:	NAME:	NAME:
F/Name:	F/Name:	F/Name:
Post Applied For:	Post Applied For:	Post Applied For:
Domicile:	Domicile:	Domicile:
Dated:	Dated:	Dated:
Amount:	Amount:	Amount:
Signature	Signature	Signature