

(310)

APPLICATION FORM

TAG #	(For
Official	use)

Multan Development Authority Applying for: Mechanical Supervisor / Sub-Engineer (Mechanic) (BS-14)

Note: Test Center in the desired city will be arranged for minimum of 200 applicants. Once selected a test center cannot be changed.								
	🗆 Islamabad	🗆 Bahawalnagar	🗆 Lahore	🗆 Bahawalpur	Passport size Recent			
Test City:	🗆 Khanewal	🗆 Layyah	🗆 Lodhran	🗆 Multan	Photograph Affix with			
(Tick only one)	□Muzaffargarh	Pakpattan	🗌 Rahim Yar Khan	🗆 Rajan Pur	Gum (Latest By 6			
	🗆 Sahiwal	🗆 Vehari	🗌 Dera Ghazi Khar	1	months)			
		Not	te: ALL DATA FIELDS A	RE REQUIRED. FILL YOUR	montinsy			
Domicile Dist	rict:	APF	PLICATION FORM CAR	EFULLY.				
Domicile	🗌 Punjab	Balochistan	🗌 Sindh (U)	Sindh (R)	آپ کی تصویر اس خانے میں ہونا ضروری ہے			
Province:	🗆 КРК	Islamabad Capit	tal Territory	🗆 FATA	میں ہونا ضروری ہے			
(Tick only one) Azad Jammu and Kashmir		Gilgit Baltis	tan 🗌 Other					

1. Personal Information (In Block Letters)

Name (in Full):			Note: Tick Only One Circ	le in each R	low.
Father's Name:			Religion: OMuslim	⊖ Non-Mu	Islim
CNIC/B-Form:			Are You Disable?	⊖Yes	◯No
L			Gender:	Vale 🔿	Female
Age:	Date of Birth (D-м-Y) Marital Status:		Armed Forces:	⊖ Yes	() No
			Only for personnel of Arme	ed Forces of Pa	akistan
Postal Address:			Deceased Servant:	′es 🔵 No)
			Deceased Civil Servant with	fe, son or dau	ughter
			Government Servant:	⊖Yes	⊖ No
Phone #:	Cell #: (Do not give here Net	work			
	converted mobile Nur		Scheduled Cast /Buddhist	: OYes	⊖ No

2. Academic Information (Note: In case of incomplete academic information, Your Application will be Declined.)								
Certificate/Degree	Degree Title	Major S		Year of Passing	Marks Obtained	Total Marks	Grade/ Percentage	Institution Name
Primary								
SSC (10 years)								
HSSC / DAE / A-Level (12 / 13 years)								
Bachelor (14 years)								
Bachelor(Hons)/Master (16 years)								
MS / M.Phil. (18 years)								
Other (Diploma / Certificate)								
3. Employment Inform Form.)	mation (If Applicable) (Note: If you ne	ed more row	s to write you	r information, y	vou can adc	an additional pag	e with Application
Organization Type	Organization I	Name	Des	ignation	Job Desc	ription	Start Date	End Date
(Government / Semi Government / Private)	(Name of the Organizat	tion / Dept.)		nation / Positi Title)	on		(Starting Date)	(End Date)

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, I shall be liable to disciplinary action which may result in cancellation of my candidature at any stage.

	Signature & Date:	Thumb Impression (Left Hand):
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Document Check list:

Tick if Attached / selected:

- □ Photograph is Attached
- $\hfill\square$ CNIC Copy is Attached on the back side of Application Form
- $\hfill\square$ Original bank Deposit Slip 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. 100/- 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 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.

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• Mobile phones or other electronic gadgets are not allowed in test center premises.

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

Send Registration Form to:

Manager Operation (MDA), Open Testing Service (OTS),

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

Innovation in Training & Assessment

OTS Copy

Branch Code: Branch Name:

PCode: 310 ONLINE DEPOSIT SLIP

Date:

Please deposit in only one bank & tick the relevant Bank

НВС 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. 100			
Amount in Words:	Hundred Rupees Only			
Note: Bank Service C	Charges Free of Cost			

A Bank Alfalah	Bank Alfalah Limited			
Remote Branch:	Bank Alfalah, PWD Branch (0335)			
Account Title:	Open Testing Service			
Account Number:	0335001004927667			
Amount in Figures:	Rs. 100			
Amount in Words:	Hundred Rupees Only			
Note: Bank Service C	Charges 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. 100		
Amount in Words:	Hundred Rupees Only		
Note: Bank Service C	Note: Bank Service Charges Free of Cost		
Allied Bank	Allied Bank Limited		
Allied Bank Remote Branch:			
	Allied Bank Limited		
Remote Branch:	Allied Bank Limited ABL Islamic Banking, PWD Branch (5133) Open Testing Service		
Remote Branch: Account Title:	Allied Bank Limited ABL Islamic Banking, PWD Branch (5133) Open Testing Service		
Remote Branch: Account Title: Account Number:	Allied Bank Limited ABL Islamic Banking, PWD Branch (5133) Open Testing Service 0020050208060021		

- 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 its required on both the Deposit Slip. 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 completie details including account number and amount deposited are correctly printed failing which the bark will not be responsible.

Open Testing Service Innovation in Training & Assessment

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BANK Copy

B	ranch Code:	Date://
в	ranch Name:	
:	0	NLINE DEPOSIT SLIP PCode: 310
1	Please depo	osit in only one bank & tick the relevant Bank
	-IBL навів валк	Habib Bank Limited
F	Remote Branch:	Habib Bank Limited, PWD Branch (2328)
-	Account Title:	Open Testing Service
-	Account Number:	23287106336103
A	Amount in Figures:	Rs. 100
	Amount in Words:	Hundred Rupees Only

Note: Bank Service Charges Free of Cost

A Bank Alfalah	Bank Alfalah Limited		
Remote Branch:	Bank Alfalah, PWD Branch (0335)		
Account Title:	Open Testing Service		
Account Number:	0335001004927667		
Amount in Figures:	Rs. 100		
Amount in Words:	Hundred Rupees Only		
Note: Bank Service C	Service Charges 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. 115
Amount in Words:	One Hundred And Fifteen Rupees Only
Note: Inclusive of Ban	k Service Charges

The Bank Must Return OTS Copy to the Candidate.
 Attach CNIC Copy with deposit silp.
 Application Form will not be entertained without Original Deposit Silp.
 Application Form will not be entertained other than against cash payment.
 FBF Endorsement is required on both the Deposit Silp.
 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 silp/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 falling which the bank will not be responsible.

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