

APPLICATION FORM Multan Development Authority Applying for: Accounts Clerk (BS-11)

TAG # (For Official use)

(310)

Note: Test Center in	the desired city will	be arranged for minim	um of 200 appl	icants. Once seled	ted a test cent	er cannot b	e changed.						
	☐ Islamabad	☐ Bahawaln	agar 🗆 L	.ahore	☐ Bah	awalpur		Passport	size Recent				
Test City:	☐ Khanewal	al 🗆 Layyah		☐ Lodhran		☐ Multan		Photograp	oh Affix with				
(Tick only one)	□Muzaffarga	rh 🗆 Pakpattan		☐ Rahim Yar Khan ☐		☐ Rajan Pur		Gum (L	atest By 6				
	☐ Sahiwal	☐ Vehari		Dera Ghazi Kha	n			•	enths)				
D				L DATA FIELDS		D. FILL YO	UR	1110					
Domicile District: APPLICATION FORM CAREFULLY. Punish													
Domicile	☐ Punjab								ب سی مصویر میں ہونا ضر				
Province:	☐ FAT	☐ FATA			<u> </u>								
(Tick only one)	(Tick only one)												
1. Personal	Information	1 (In Block Letters)											
Name (in Full):						Note:	Tick Only	y One Circle in	each Row.				
Father's Name:						Relig	Religion:						
CNIC/B-Form:						Are \	ou Disable		Yes O No				
A	Data of D	inth (5 com		NA-wital Ctate		Gend	ler:		○ Female				
Age:	Date of B	irth (D-M-Y)		Marital Stati	us:	AIIII	ed Forces:	ces: Yes No ersonnel of Armed Forces of Pakistan					
Postal Address:							ased Serva	_					
								Servant wife, son	\sim				
							rnment Se		Yes \(\cap \) No				
Phone #:		Cell #:		(Do not give	here Network								
					obile Numbers	Sche	duled Cast	:/Buddhist:	Yes O No				
2 Acadomi	a Informatio	Make le see of in											
2. Academic Information (Note: In case of incomplete academic information, Your Application will be Declined.)													
Cortificato								Grade/	Institution				
Certificate,		Degree Title	Major S	ubjects	Year of	tion will be Marks Obtained	Declined.) Total Marks	Grade/ Percentage	Institution Name				
Certificate, Primary				ubjects	Year of	Marks	Total	•					
				ubjects	Year of	Marks	Total	•					
Primary SSC (10 years) HSSC / DAE / A	/Degree			ubjects	Year of	Marks	Total	•					
Primary SSC (10 years)	/Degree A-Level			ubjects	Year of	Marks	Total	•					
Primary SSC (10 years) HSSC / DAE / A (12 / 13 years)	A-Level			ubjects	Year of	Marks	Total	•					
Primary SSC (10 years) HSSC / DAE / 1 (12 / 13 years) Bachelor (14 years) Bachelor(Hon	A-Level aars) as)/Master			ubjects	Year of	Marks	Total	•					
Primary SSC (10 years) HSSC / DAE / 1 (12 / 13 years) Bachelor (14 years) Bachelor (Home (16 years)	A-Level ears) as)/Master 8 years)			ubjects	Year of	Marks	Total	•					
Primary SSC (10 years) HSSC / DAE / 1/ (12 / 13 years) Bachelor (14 years) Bachelor (Home (16 years)) MS / M.Phil. (10) Other (Diploma)	A-Level ears) s)/Master 8 years) / Certificate)		Major S	Subjects	Year of Passing (Marks Obtained	Total Marks	Percentage	Name				
Primary SSC (10 years) HSSC / DAE / 1 (12 / 13 years) Bachelor (14 years) Bachelor (Home (16 years)) MS / M.Phil. (10 Other (Diploma)	A-Level ars) s)/Master 8 years) / Certificate) nent Informa	Degree Title	Major S	Subjects	Year of Passing (Marks Obtained	Total Marks	Percentage	Name				
Primary SSC (10 years) HSSC / DAE / / (12 / 13 years) Bachelor (14 years) MS / M.Phil. (10 Other (Diploma / Form.) Organizatio (Government / Sem	A-Level ars) s)/Master 8 years) / Certificate) nent Information Type ii Government	Degree Title	Major S (Note: If you nee	eed more rows to Design (Your Designate)	Year of Passing (Marks Obtained	Total Marks	Percentage	Name e with Application				
Primary SSC (10 years) HSSC / DAE / 1 (12 / 13 years) Bachelor (14 years) MS / M.Phil. (10) Other (Diploma of the communication) Organization	A-Level ars) s)/Master 8 years) / Certificate) nent Information Type ii Government	Degree Title ation (If Applicable) Organization	Major S (Note: If you nee	eed more rows to	Year of Passing (Marks Obtained	Total Marks	Percentage d an additional pag Start Date	Name e with Application End Date				
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4. Undertaking by Applicant					
Id/s/w of	do hereby solemnly				
affirm that I have read and understood the conditions for appl					
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 Im	pression (Left Hand):				

Document Check list:

Tick if Attached / selected:

- ☐ Photograph is Attached
- ☐ CNIC Copy is Attached on the back side of Application Form
- □ 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.
- 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.

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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

Open Testing Service Innovation in Training & Assessment

BANK Copy

OTS Copy

		9.0						
Branch Code:	Date: / /	:	Branch Code:		Date:/			
Branch Name:			Branch Name:					
ON	LINE DEPOSIT SLIP	le: 310		NI IN	E DEPOSIT SLIP PCode: 31			
	It In only one bank & tick the relevant Bank		Please deposit in only one bank & tick the relevant Bank					
HBL HABIB BANK	Habib Bank Limited	i	HBL HABIB BANK	П	Habib Bank Limited			
	Habib Bank Limited, PWD Branch (2328)	Remote Branch:	Habi	b Bank Limited, PWD Branch (2328)			
Account Title: 0			Account Title:	Open Testing Service				
Account Number: 2	count Number: 23287106336103		Account Number:	r: 23287106336103				
Amount in Figures: F	gures: Rs. 100		Amount in Figures:	Rs. 100				
Amount in Words:				Hundred Rupees Only				
Note: Bank Service Cha	arges Free of Cost		Note: Bank Service C	harges	Free of Cost			
		_ [
A Bank Alfalah	Bank Alfalah Limited		A Bank Alfalah		Bank Alfalah Limited			
	Bank Alfalah, PWD Branch (0335)	\neg	Remote Branch:	Bank	Alfalah, PWD Branch (0335)			
Account Title: 0	Open Testing Service	:	Account Title:	Oper	n Testing Service			
Account Number: 0	0335001004927667		Account Number:	0335	001004927667			
Amount in Figures: F	Rs. 100		Amount in Figures:	Rs.	100			
Amount in Words:	Hundred Rupees Only		Amount in Words:		Hundred Rupees Only			
Note: Bank Service Cha	Note: Bank Service Charges Free of Cost			Note: Bank Service Charges Free of Cost				
Allied Bank	Allied Bank Limited		Allied Bank	П	Allied Bank Limited			
Remote Branch: A	ABL Islamic Banking, PWD Branch	(5133)	Remote Branch:	ABL	Islamic Banking, PWD Branch (5133			
Account Title: 0	Open Testing Service		Account Title:	Oper	n Testing Service			
Account Number: 0	0020050208060021	:	Account Number:	0020	050208060021			
Amount in Figures: F	Rs. 115	- □ !	Amount in Figures:	Rs.	115			
Amount in Words:	One Hundred And Fifteen Rupees	Only	Amount in Words:	o	ne Hundred And Fifteen Rupees Only			
Note: Inclusive of Bank	Service Charges		Note: Inclusive of Bar	ık Servi	ice Charges			
 Application Form will not be ent FBP Endorsement is required of Deposit it in any online country Cash should always be deposit receipt printed through flatbed the counter, please be sure to 	silp. tertained without Original Deposit Silp. tertained other than against cash payment. In both the Deposit Silp.	aving luding	 FBP Endorsement is require Deposit it in any online coun Cash should always be depreceipt printed through flatby the counter, please be sure 	entertaine entertaine ed on both try wide b osited at t ed printer e to check	ed without Original Deposit Slip. ed other than against cash payment. the Deposit Slip.			
Applicant Name:			Applicant Name:					
Applicant Father Na	ame:		Applicant Father I	Name:				
CNIC No. / Form B	No.:		CNIC No. / Form	B No.:				
Applied For:			Applied For:					
Applicant Sign	ature Cashier		Applicant Sig	ınature	e Cashier			