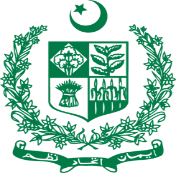
|  |  |
| --- | --- |
|  | Government of Pakistan  Ministry of Energy (Petroleum Division)  (Policy Wing)  <><><> |

**PROFORMA**

**Name of Post**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

It is certified that the information mentioned above is true and correct to the best of my knowledge and nothing has been concealed. Moreover, I have not been convicted by any court of law. In case, any information proved false the candidate will be dealt under the rules.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Candidate: |  | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| Father/Husband's Name: |  | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| Date of Birth : |  | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| CNIC Number: |  |  |  |  |  | - |  |  |  |  |  |  |  | - |  |
|  |  | | | | | | | | | | | | | | |
| Gender: | Male ⬜ Female ⬜ | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| Domicile: (Province & District) |  | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| Cell Number: **(Mandatory)** |  | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| Religion: |  | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| Email: **(Mandatory)** |  | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| Government Servant: | Yes ⬜ No ⬜ | | | | | | | | | | | | | | |
|  | (If yes, copy of NOC must be attached) | | | | | | | | | | | | | | |

| **Educational Qualification\*:** |
| --- |
|  |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Degree/Examination** | **Year of Passing** | **University/Board** | **Obtained**  **Marks** | **Total**  **Marks** | **Percentage** | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  |   **Experience:** |
|  |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Name of Institution** | **Designation** | **Duration (Years)** | **Duration  (Months)** | **Nature of Experience** | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  |  |  |  | | --- | --- | | Postal Address: |  | |  |  | | Permanent Address: |  | |
|  |

Date\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_