



OFFICE OF THE CHAIRMAN BOARD OF GOVERNORS
MEDICAL TEACHING INSTITUTION, NOWSHERA



APPLICATION FORM FOR ADMINISTRATIVE POSTS

PHOTO

Post Applied For _____ Serial No. _____

Instructions: This application form, duly completed should be submitted to the office of chairman BoG MTI Nowshera on or before the due date along with:-

- i. Attested photocopies of all requisite documents along with CNIC and Passport size Picture.
- ii. Persons already in employment should submit their application forms through proper channel along-with NOC issued by the competent authority.
- iii. Incomplete application forms and those received after the due date will not be entertained.
- iv. Use additional sheets, if required.

1. Name (in BLOCK letters): _____

2. Father’s Name: _____

3. Address and other particulars:

i. For correspondence (interview call) _____

ii. Mobile _____ iii. Phone No. _____

iv. Permanent Home Address: _____

v. E-Mail Address _____ vi. Gender. _____

vii. Domicile _____ viii. Nationality _____

ix. Marital Status _____ x. Date of Birth _____

4. Education: Commencing from the Matriculation or Equivalent Examination.

Sr. No	Certificate/ Degree	Name of Board/ University	Exam. with year of Passing	Obtained/ Total Marks	Division/ CGPA
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

5. Formal Training or Education:

Sr. No	Name of Institution	Type of Training	Period		Certificate or Diploma obtained
			From	To	
1.					
2.					
3.					



4.				
5.				
6.				
7.				
8.				
9.				
10.				

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

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

Sr. No	Name of Institute Organization	Designation	BPS	Period	Total			Nature of Jobs (permanent/ temporary)
				From-To	YY	MM	DD	
					Grand Total Exp:			



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11. Attach List of Miscellaneous Teaching or Administrative Experience, if any.
12. Membership of Learned Societies and other Achievements in the University, Public or International Affairs, if any.
13. Countries Visited:

Sr. No	Name of Country	Duration	Purpose of Visit

14. List of attested documents attached

S.NO	Documents	Yes/NO
i.	Bio-data	
ii.	Domicile Certificate & C.N.I.C	
iii.	Educational documents (Matric, intermediate, etc.)	
iv.	Professional degrees (MBBS or Equivalent, FCPS Degree or Equivalent)	
v.	DMC/ Academics Certificates (MBBS, FCPS, etc)	
vi.	Experience Certificates & Professional Achievements	
vii.	Research papers	
viii.	NOC Govt/semi Govt	
ix.	Conference organized/ attended	
x.	Others	

I hereby solemnly declare and affirm on oath, that all the entries made in this application form and documents attached herewith are genuine, true and correct to the best of my knowledge and belief on that nothing has been concealed.

Name & Signature of the Candidate

Dated:_____/_____/ 2023