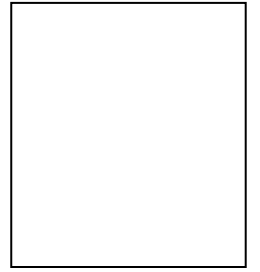




UNIVERSITY OF SINDH APPLICATION FORM



1. Name in full (Block Letters)		2. Name of father	3. Surname
4. Present Address Tel No. Mobile No.		5. Permanent Address E-mail:	
6. (i) Date of Birth: (ii) Age:	7. Religion	8. Nationality	
9. Sex (Tick) Male <input type="checkbox"/> Female <input type="checkbox"/>	10. Marital Status (Tick) Single <input type="checkbox"/> Married <input type="checkbox"/>		
11. Place of Birth District Province	12. Domicile: District:	Province:	
	PRC: District:	Province:	
13. Computerized National Identity Card No.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		

14. EDUCATIONAL (ACADEMIC AND PROFESSIONAL) QUALIFICATIONS

Please attach attested Photostat copies

Examination Passed	Name of the University / Board	Division/Grade	Year	Subjects	Total Marks	Marks Obtained
Matriculation Inter Arts/ Science/Com. B.A./B.Sc./B.Comm M.A./M.Sc./B.S. (4 years) M.Com. M.Phil/M.S Ph.D.						

15. Language	Speak	Write	Read

16. SPECIALIZED TRAINING (IF ANY)

17. EMPLOYMENT RECORD (IF ANY)

(Use additional sheet if necessary)

Name of employer	Date of Joining	Date of Leaving	Reasons for Leaving job	Nature of employment (give the name of the post held)	Salary

18. REFERENCES: List three competent and responsible persons, not related to you by blood or marriage who particularly qualify to supply definite information regarding your character and ability.

Name with Position	Full Address, Telephone No. Mobile No.	Remarks
1.		
2.		
3.		

19. I certify that the statements made by me in answers to above questions are true, complete and correct, to the best of my knowledge and belief. I undertake that any false statement or any required information withheld from this form may provide grounds for the withdrawal of any offer or dismissal, If an appointment has been accepted.

20. Attested copies of following testimonials/certificates are attached.

21. Mailing Address

Place _____

Date _____

Signature of Applicant

Name of the Applicant _____

Name of Post _____

Department/Instt./Centre _____ Discipline: _____

Advertisement No. _____ in _____ Date _____
(Name of News Paper)

CHALLAN / POSTAL

ORDER NO. 2918912

BANK / BRANCH:

DATED 19-4-2021

Paid Rs. 5000/-

S
19-4-2021

UNIVERSITY OF SINDH
JAMSHORO

Challan / Postal Order No. _____ Bank / Branch:

Dated: _____

For Rs. _____

INSTRUCTIONS

- (i) The application should be filled-in complete in all respects.
- (ii) The required information / particulars should either be typed or written in a very legible hand.
- (iii) No application will be considered if the same is not received within the scheduled/prescribed date.
- (iv) Applicants who are already employed under Government / Semi Government / Autonomous organizations are required to produce NOC of their employer / competent authority, otherwise their applications will not be considered if not received through proper channel within closing date for receipt of application.
- (v) Extra sheets may be attached if the requisite information cannot be fully incorporated in any of the columns of the applications.
- (vi) Concealment of any of the required information / particulars is strictly prohibited and will disqualify the candidate at any stage of his service duration.
- (vii) Canvassing in any manner may disqualify candidate.
- (viii) Previous service details including copy of appointment orders may be attached.
- (ix) The application should be forwarded to the **REGISTRAR, UNIVERSITY OF SINDH, JAMSHORO**, under registered cover, so as to reach him on or before the last date prescribed for the receipt of applications.