

# Job Application Form

## COMSATS University Vehari Campus



| Islamabad                | Lahore                   | Abbottabad               | Wah                      | Attock                   | Sahiwal                  | Vehari                   |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Applicant Name \_\_\_\_\_

Post applied for \_\_\_\_\_

Department \_\_\_\_\_

*Note: Please mark/fill information as applicable*

Cost Rs.500/-

**(I) Personal Information**

Affix a recent  
Photograph  
(*passport size*)

|      |  |
|------|--|
| Name |  |
|------|--|

|               |  |
|---------------|--|
| Father's Name |  |
|---------------|--|

|        |   |      |  |   |        |  |
|--------|---|------|--|---|--------|--|
| Gender | <table border="1"><tr><td>MALE</td><td></td></tr></table> | MALE |  | <table border="1"><tr><td>FEMALE</td><td></td></tr></table> | FEMALE |  |
| MALE   |   |      |  |   |        |  |
| FEMALE |   |      |  |   |        |  |

|               |                |     |   |
|---------------|----------------|-----|---|
| Date of Birth | ____-____-____ | Age | ____ Years, ____ Month(s) & ____ day(s) |
|---------------|----------------|-----|---|

|                                      |  |  |  |  |  |   |  |  |  |  |  |  |  |   |  |
|--------------------------------------|--|--|--|--|--|---|--|--|--|--|--|--|--|---|--|
| CNIC No. (copy may also be attached) |  |  |  |  |  | - |  |  |  |  |  |  |  | - |  |
|--------------------------------------|--|--|--|--|--|---|--|--|--|--|--|--|--|---|--|

|                |  |             |  |
|----------------|--|-------------|--|
| Marital Status |  | Blood Group |  |
|----------------|--|-------------|--|

|             |  |  |  |
|-------------|--|--|--|
| Nationality |  | Domicile<br><small>(copy may also be attached)</small> |  |
|-------------|--|--|--|

|                       |  |              |  |
|-----------------------|--|--------------|--|
| Highest Qualification |  | Passing Year |  |
|-----------------------|--|--------------|--|

|                                       |  |  |  |
|---------------------------------------|--|--|--|
| PEC Reg. No. ( <i>if applicable</i> ) |  | NTS-GAT<br>(Subject)<br><small>(copy may also be attached)</small> |  |
|---------------------------------------|--|--|--|

|                         |  |
|-------------------------|--|
| Present/ Postal Address |  |
|                         |  |
|                         |  |

|                   |  |
|-------------------|--|
| Permanent Address |  |
|                   |  |
|                   |  |

|            |  |
|------------|--|
| Mobile No. |  |
|------------|--|

|                       |  |
|-----------------------|--|
| Phone No. (Residence) |  |
|-----------------------|--|

|        |  |
|--------|--|
| E-Mail |  |
|--------|--|

(II) **Academic Background, Professional Training & Extra/ Co-curricular Activities**

(a) **Academic Background** (Please start from highest qualification and go in descending order)

| Degree/<br>Certificate<br>held | Session |    | Year of<br>Award | Field/<br>Subject | University/ Institute/<br>Board |         | Marks Detail |       | Grade/<br>Division/<br>CGPA |
|--------------------------------|---------|----|------------------|-------------------|---------------------------------|---------|--------------|-------|-----------------------------|
|                                | FROM    | TO |                  |                   | Institution Name                | Country | Obtained     | Total |                             |
|                                |         |    |                  |                   |                                 |         |              |       |                             |
|                                |         |    |                  |                   |                                 |         |              |       |                             |
|                                |         |    |                  |                   |                                 |         |              |       |                             |
|                                |         |    |                  |                   |                                 |         |              |       |                             |
|                                |         |    |                  |                   |                                 |         |              |       |                             |
|                                |         |    |                  |                   |                                 |         |              |       |                             |

(b) **Professional Training** (Please start from most recent training and go in descending order)

| Course | Diploma/Certificate | Field of study | Institution | Grade |
|--------|---------------------|----------------|-------------|-------|
|        |                     |                |             |       |
|        |                     |                |             |       |
|        |                     |                |             |       |
|        |                     |                |             |       |

(c) **Extra/Co-curricular Activities/Hobbies/Interests** (if any)

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(III) **Employment History** (Please start from your recent job and go in descending order)

(a) **Teaching**

| Name of Organization | Designation | Scale | Job Profile | Duration Time             |    |                |
|----------------------|-------------|-------|-------------|---------------------------|----|----------------|
|                      |             |       |             | Dates                     |    | Period         |
|                      |             |       |             | From                      | To | YY-MM-DD       |
|                      |             |       |             |                           |    | ____-____-____ |
|                      |             |       |             |                           |    | ____-____-____ |
|                      |             |       |             |                           |    | ____-____-____ |
|                      |             |       |             |                           |    | ____-____-____ |
| Total                |             |       |             | ____ YY, ____ MM, ____ DD |    |                |

(b) **Industrial** (if any)

| Name of Organization | Designation | Scale | Job Profile | Duration Time             |    |                |
|----------------------|-------------|-------|-------------|---------------------------|----|----------------|
|                      |             |       |             | Dates                     |    | Period         |
|                      |             |       |             | From                      | To | YY-MM-DD       |
|                      |             |       |             |                           |    | ____-____-____ |
|                      |             |       |             |                           |    | ____-____-____ |
|                      |             |       |             |                           |    | ____-____-____ |
|                      |             |       |             |                           |    | ____-____-____ |
| Total                |             |       |             | ____ YY, ____ MM, ____ DD |    |                |

| Total Experience<br>(Teaching & Industrial) | Years | Months | Days |
|---|-------|--------|------|
|   |       |        |      |

**(IV) Research Publications**

(Must include name of journal; year/volume of publication; page numbers; author(s); title)

**(a) National/ International Journal Papers**

| <b>Sr. #</b> | <b>Title of Publication</b> | <b>Complete Name of Journal and Address</b> | <b>Vol. No.</b> | <b>Page No.</b> | <b>Year</b> | <b>HEC approved (Yes/ No)</b> | <b>Impact Factor</b> |
|--------------|-----------------------------|---|-----------------|-----------------|-------------|-------------------------------|----------------------|
| 1.           |                             |   |                 |                 |             |                               |                      |
| 2.           |                             |   |                 |                 |             |                               |                      |
| 3.           |                             |   |                 |                 |             |                               |                      |
| 4.           |                             |   |                 |                 |             |                               |                      |

**(b) National/ International Conference Papers**

| <b>Sr. #</b> | <b>Title of Publication</b> | <b>Conference</b> | <b>Year</b> | <b>Venue</b> |
|--------------|-----------------------------|-------------------|-------------|--------------|
| 1.           |                             |                   |             |              |
| 2.           |                             |                   |             |              |
| 3.           |                             |                   |             |              |
| 4.           |                             |                   |             |              |

**(c) Book/ Book Chapter Written (if any)**

| <b>Sr. #</b> | <b>Title</b> | <b>Subject/ Description</b> | <b>Publisher (if any)</b> |
|--------------|--------------|-----------------------------|---------------------------|
| 1.           |              |                             |                           |
| 2.           |              |                             |                           |
| 3.           |              |                             |                           |

**(d) Lab Manual (if any)**

| <b>Sr. #</b> | <b>Title/ Topic</b> | <b>Subject/ Description</b> | <b>Publisher (if any)</b> |
|--------------|---------------------|-----------------------------|---------------------------|
| 1.           |                     |                             |                           |
| 2.           |                     |                             |                           |
| 3.           |                     |                             |                           |

(V) **Reference:-** Provide Two Academic/Professional References

Reference No: 1. Name\_\_\_\_\_ Position\_\_\_\_\_  
Address\_\_\_\_\_  
\_\_\_\_\_  
Phone No\_\_\_\_\_  
Email\_\_\_\_\_

Reference No: 2. Name\_\_\_\_\_ Position\_\_\_\_\_  
Address\_\_\_\_\_  
\_\_\_\_\_  
Phone No\_\_\_\_\_  
Email\_\_\_\_\_

By signing below and submitting this application form I, -----,  
confirm that the information I have provided is accurate to the best of my knowledge and that I  
authorize you to contact the references provided above for further information.

Date\_\_\_\_\_

\_\_\_\_\_  
**Signature of the Applicant**

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**FOR OFFICE USE**

Application Received by: \_\_\_\_\_ Date \_\_\_\_\_

Checked by: \_\_\_\_\_ Date \_\_\_\_\_

Short Listed ☐ Not Short Listed ☐ if not, reason(s) \_\_\_\_\_

\_\_\_\_\_  
Signature & Name of Dealing Officer \_\_\_\_\_

Date\_\_\_\_\_