



University of Swat

Khyber Pakhtunkhwa, Sector-F, Kanju, Township, Swat

www.uswat.edu.pk

meetings@uswat.edu.pk

Ph: (0946) 923011

Form No. _____

Attached Only
One recent
photo here

EMPLOYMENT FORM

For (BS-16 and below)

Bank Draft/University Receipt No. _____ Dated: _____	Post applied for _____
Bank Name: _____	_____

A. PERSONAL INFORMATION:

1. Name (in block letters) _____
2. Father's Name (in block letters) _____
3. (a) Date of Birth _____ (b) Domicile _____
(c) Land Line _____ (d) Mobile _____
(e) CNIC No. _____ (f) Email _____
4. Permanent Address _____
5. Mailing Address _____

B. ACADEMICS:

Qualifications	Duration (Month/Year)		Division/ %age/ CGPA	Marks Obt/ Total Marks	Subject/ Major Field of Specialization	Full/ Part Time Regular/ Private	Board / University/ Institute/Country
	From	To					
M.Phil/MS							
Masters/ Equivalent							
Bachelors/ Equivalent							
Intermediate/ Equivalent							
Matric/ Equivalent							

C. PROFESSIONAL EXPERIENCE

Name of Institution/ Organization	Position held with BS if any	Responsibility	Period		Total Period	Reason for leaving
			From	To		

(Attached extra sheet, if required)

DECLARATION: I hereby declare that all the entries in this application form and all the additional particulars furnished along with it, are true to the best of my knowledge. I believe and understand that any mis-representation/concealment of facts in it can result in the rejection of my application, and even after my selection as _____ shall lead to dismissal / termination from service.	_____ Signature of Candidate (With date)
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For Office Use only

Recommendations of the Scrutiny Committee

The candidate is

Eligible

Not Eligible

If the candidate is not eligible (please state the reasons):

i	
ii	
iii	

NAME OF EVALUATORS

I) _____
 II) _____
 III) _____

Signature _____
 Signature _____
 Signature _____



Office of the Assistant Registrar (M)

University of Swat

(0946) 923011

www.uswat.edu.pk

khurshid@uswat.edu.pk

ACKNOWLEDGMENT

Form No: _____

Dated: _____

Name: _____ Father's Name: _____

Post Applied for _____

Dealing Assistant



Office of the Assistant Registrar (M)

University of Swat

(0946) 923011

www.uswat.edu.pk

khurshid@uswat.edu.pk

ACKNOWLEDGMENT

Form No: _____

Dated: _____

Name: _____ Father's Name: _____

Post Applied for _____

Dealing Assistant