

NATIONAL INSTITUTE OF MANAGEMENT, KARACHI GOVERNMENT OF PAKISTAN

APPLICATION FORM

NATIONAL	TUTE OF AMAGINETY						Applica	ntion No	_
D	1: 1E							(For office use	;)
	pplied For:								
Name of Candidate: Father's Name:									
							Photo		
CNIC I			D: . :						
Domicile: Date of Birth:		Province: District:							
		Age on Closing Date: Nationality Marital Status							
Religio		Nat	ionality		N	larital S	tatus		
	nent Address:								
	Address:								
Mobile No:		E-mail Address:							
_		Yes/No							
QUAL	<u>IFICATION</u> (w	rite recent education	first then prev	ious)					
Sr. No	Degree	Major Subjects	Mark		Division	/ Grade	Passing	University/Board	
		3	Obtained	Total			Year		
PROF	ESSIONAL/TE	CHNICAL QUALIF	ICATIONS/	COURS	ES/TRA	AINING	<u>SS</u>		
Sr.	Passing Duration						University/Board / Institution		
No.	Diploma/Course / Certificate		Year	(Months)		 '	——————————————————————————————————————		
DETA	<u>IL OF EXPERI</u>	ENCE:							
				Duration					
Sr. No.	Position Held	Field of wor	k From			Total		Name of the Organization	
			FIOIII	- 1		Period			
I herel	ov declare that t	the above particulars	and informa	ation sta	ited are	true. co	rrect. and	complete to the	
	f my belief and	•			2	,, ,,	,	1	
Dated:			Sion	ature of	Candida	te:			
			2.50	01					