

FORM No.

NISHTAR MEDICAL UNIVERSITY, MULTAN



JOB APPLICATION PROFORMA

"Please attach
two recent
passport-size
color
photographs
here."

Post applied for: _____

Department: _____

Nam of applicant (in Block Letter): _____

S/o, D/O, W/o: _____

Date of birth DD/MM/YY ____/____/____ Age: ____ Years ____ Month ____ Days ____
(on the last date of submission of application)

CNIC							-								-	
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Domicile: _____ District: _____

PNC Reg. No.: _____ Valid Upto: _____

Marital Status: Single _____ Married _____ Widowed _____

Telephone Number: Mobile _____ PTCL: _____

Email Address: _____

Postal Address: (where interview call is to be sent) _____

Permanent Address: _____

Basic Qualifications:

Qualification	Year	Institution	Total Marks	Marks Obtained	% age	Attempts
Matric						
F.Sc						
B.Sc Nursing Generic						
Diploma of General Nursing						
Diploma of Midwifery						
Diploma of LHV						
Please calculate marks of all professional result and also calculate percentage						

Internship

Period		Total Duration	Hospital/ Institution
From	To		

(Please attach copies of all relevant documents)

Academic Honors Achieved: (Matric/ F.Sc/ B.Sc Nursing Generic/ Post-Graduation)

Qualification	Year	Institution

(Please attach copies of all relevant documents)

Service Experience

Designation	Hospital/ Institution	Period		Duration
		From	To	

(Please attach copies of all relevant documents)

Checklist

Please write YES or NO against the photocopies of certificates and other documents which you have attached with the application.

A	Matriculation		B	F.Sc	
C	All Professional Result Cards of B.Sc Nursing Generic / General Nursing		D	B.Sc Nursing Generic Degree	
E	Diploma of Midwifery		F	Diploma of LHV	
G	Diploma of General Nursing		H	PNC Registration upto date	
I	Experience Certificate including Internship		J	NOC if you are Government Servant	
Any other					

I have filled this application form carefully. I do hereby solemnly declare that replies given by me in this application form are correct to the best of my knowledge.

I fully understand that if my application is incomplete, unsigned or not accompanied by the attested photocopies of all the relevant documents, it will be rejected.

Dated: _____

Signature of candidate _____