APPLICATION FORM

Reg	No:
1109	110.

Official	IISE	only)	

PASTE YOUR RECENT



FFBL Power Company Limited

A. Is your age according to the prescribed age limit for the desired post?



(If Yes Then Please Attach Disability

Certificate)

Eligibility Criteria:

01. Name in Full:

04. Gender:

07. Email:

02. Father's Name:

03. Candidate CNIC #:

10. Postal Address: ____

05. Have you any disability?

06. Date of Birth: (DD/MM/YYYY)

	you have requisite Qualification & Experience as Yound in Advertisement?					s I	No		PASSPO SIZE CO PHOTOG	RAPH		
f your re	ply is "Yes" ank Onl	to A & B above	sit of F	Rs: 40	0/- from	Design	ated Ban	-		s.	With White/ Backgroui	
		rm will not be er	ntertained	without c	riginal deposi		,					
Bank I		ck agains	t one	nost	vou wan	<u> </u>	osit Date					
Sr.No		Post Applied		post	Sr.N		Name of Po	st Ap _l	olied For			
1	Non-Management Apprentice (Mechanical)				Non-Management Apprentice (Electrical/Instrument)							
2		agement App	rentice			•	1.		•			
	(Chemica	l)										
	(Chemica	1)										
03. De	T	i) Γest City:	Fill only	one box.								
03. De	esired ⁷		Fill only	one box.	Lahore			03.	Pes	hawar		
	esired ⁷	Γest City:	Fill only		Lahore Quetta			03.		hawar lerabad	ı	
01.	esired T	Γest City:	Fill only	02.		ad			Hyd	lerabad		

Male

YES

Female

No

_____08. Phone No (Res.) _____ 09. Mobile(mandatory)____

05. Academic Information: (Mandatory)

- Note: 1. UTS will not issue Roll No Slips to those who have not filled in their academic record properly.
 - 2. Candidate should convert their grades / CGPA into marks
 - 3. Write exact degree name & major subject mention in certificate / transcript.

Certificate / Degree Name	Degree Title	Specialization / Major Subject	Year Passing	Obtained Marks/CGPA	Total Marks	%	Board / University
Matric (10 Years)	Matric	Science Arts Other:					
Intermediate	F.A F. Sc. I.com	Pre-Engineering Pre-Medical ICS					
A-level (12 Year)	Other:	Other:					
Diploma (03 years)	DAE						
Other							

06. Undertaking by the applicant:

along with it are true to the never been dismissed or rer autonomous or state enterp	best of my knowledge and belief and not noved from Govt. service under any provi	do hereby solemnly declare that all additional particulars/documents/ certificates furnished hing has been concealed. I also declare that I have ncial, federal government autonomous and semiter, I shall be liable to disciplinary action which may
Date:	Signature of the candidate:	

Instructions:

- Fill the application form properly with complete and correct information. Do not leave any field blank, otherwise your application shall be rejected.
- Incorrect, false or forged information may result in cancellation of your candidature at any stage. Attach two recent passport size photograph and attested copy of CNIC.
- By hand submission of application form is not allowed and Test fee is non-refundable and non-transferable
- Last Date for FEE submission is 01st Dec,2021
- The application should reach UTS office latest by the last date of submission of Application form.
- UTS will not be responsible for late receiving of application through courier/ Pakistan post etc.

Staple
YOUR
RECENT
PASSPORT
SIZE 2x
COLOR
PHOTOGRA
PH

k _____

Please Send Application Forms to:

Manager Operations (PID: FPCL-II) Universal Testing Services (UTS), 278-B Main Nazim-Ud-Din Road, F-10/1 Islamabad. Help line (051-111-258-369, 051-2152815)

Universal Testing Services Apply Last Date: 01-12-2021 **Universal Testing Service** Bank Copy CONSULTANT · ASSESSMENT · TRAINING Branch Code:_____ Branch Name: اپنی رقم ہمیشہ کاؤنٹر پر جمع کروائیں اور ڈپازٹ سلپ پر فلیٹ ہیڈ پرنٹر سے الیکٹرونک رسید حاصل کریں کاؤٹر چھوڑنے سے پہلے اس الیکٹرونک رسید مکمل کوائف بع رقم اور اکاؤنٹ نمبر چیک کرلیں بصورت دیگر بینک ذمہ دار نہ ہوگا Habib Bank Ltd. United Bank Ltd. **Branch:** Online Branches Nation Wide **Branch:** Online Branches Nation Wide A/C Title: Universal Testing Services A/C Title: Universal Testing Services A/C No: 2269-7930367803 A/C No: <u>1774-000228600116</u> S/D of:__ Cell No:___ Applicant Name:___ CNIC No: Post Applied For:_____ Amount in Words: Four Hundred Only. Project ID: FPCL-II Amount RS: 400 /-This Fee is non refundable and non transferable. Apply Last Date: 01-12-2021 **Universal Testing Services**

Universal Testing	Service TRAINING Candid	date Copy	
Date:	Branch Code:	Branch I	Name:
	ِ نشان لگائیں۔	جمع کروائیں.اور اس بینک کے دیئے ہوئے باکس پر	نوٹ : برائی مہربانی فیس صرف ایک بینک میں .
Habib Bank Ltd.	HBL	United Bank Ltd.	where you come first
Branch: Online Branches Nation Wide		Branch: Online Branches Nation Wide	
A/C Title: <u>Universal Testing Services</u>		A/C Title: Universal Testing Services	
A/C No: 2269-7930367803		A/C No: <u>1774-000228600116</u>	
Applicant Name:	S/D of:_		Cell No:
CNIC No:		Post Applied For:	
Amount RS: <u>400 /-</u>	Amount in Words: Four Hundr	ed Only.	Project ID: <u>FPCL-II</u>
	This Fee is non refund	able and non transferable.	

Apply Last Date: 01-12-2021 **Universal Testing Services Universal Testing Service** UTS Copy CONSULTANT-ASSESSMENT-TRAINING Branch Code: Branch Name:___ نوٹ : برائی مہربانی فیس صرف ایک بینک میں جمع کروائیں اور اس بینک کے دیئے ہوئے باکس پر نشان لگائیں۔ Habib Bank Ltd. United Bank Ltd. **Branch:** Online Branches Nation Wide **Branch:** Online Branches Nation Wide A/C Title: Universal Testing Services A/C Title: Universal Testing Services A/C No: 2269-7930367803 A/C No: 1774-000228600116 Applicant Name:___ S/D of: Cell No: CNIC No:_ Post Applied For:___ Project ID: FPCL-II Amount RS: 400 /-Amount in Words: Four Hundred Only. This Fee is non refundable and non transferable.