



RAWALPINDI WOMEN UNIVERSITY

Job Application Form (BS 16 & Below)

Photograph here

Post Applied For (BS-____): _____

Name of Candidate: _____

Father's / Husband's Name: _____ CNIC No.: _____

Date of Birth: _____ Domicile: _____

Religion: _____ Marital Status: _____

Postal Address: _____

Permanent Address: _____

Contact No.: _____

Email Address: _____

Educational Qualification

Degree	University	Passing Year	Total Marks	Obtained Marks	Percentage	Division	Subjects

Work Experience

Designation/Post	Organization	Grade/Scale	Duration	Work type

GENERAL DECLARATION

I Mr./Ms. _____ S-D/O _____ by putting my signature submit the above application and affirm that the information given therein is correct to the best of my knowledge and belief and that I authorize you to verify it from the above references or by any other authentic sources. In case, any information is proved completely or partially false/incorrect, the University will have full right to take legal action as deems fit under the rules.

Dated: _____

Signature: _____

Sr#	Document/copy of	Yes/No
1.	CNIC	
2.	Domicile	
3.	Certificates/DMC/Degrees	
4.	Experience Certificate(s)(if any)	
5.	Others	

Correspondence Address
Name:
Address:
Mobile No:

Correspondence Address
Name:
Address:
Mobile No:

Correspondence Address
Name:
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Mobile No: