



**PAKISTAN
WATER AND POWER DEVELOPMENT AUTHORITY**

Application Form for the Post of Advisor to Authority for Rehabilitation, Refurbishment & Upgradation of Existing & Old Hydel Power Stations

Serial No. _____
(To be filled by office)

Post Applied for _____

Advertisement published in _____ Dated _____

PHOTO
Attested copy of the most recent photograph should be firmly gummed or stapled in this space. The candidate should sign across the photo-graph

1. Personal Data

a. Name (BLOCK LETTERS)

b. Father's Name _____

c. Postal Address _____

d. Permanent Address _____

e. Telephone No with City Code: Res : _____ Office _____
Mobile _____

f. Email Address _____

g. CNIC No.

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h. Gender Male Female

i. Religion Muslim Christian Hindu Sikh Qadiani

j. Date of Birth (as per Secondary School/ Matric Certificate)

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k. Age on closing date of advertisement

Years	Months	Days

l. Place of Birth _____

m. Domicile

Province	
District	

n. Marital Status Single Married

2. Academic Qualification (in descending order)

Certificate / Degree/ Diploma	Year of Passing	Total Marks	Marks Obtained	Division/ Grade/ CGPA	Final %age	School/ College/ Institution	Board / University
1	2	3	4	5	6	7	8

3. Service Record (in descending order)

Organization / Department	Designation	Grade	Pay	Nature of Duties Assigned / Performed	Duration		Total
					From	To	
Total Experience							

4. Detail of Experience of Electro - Mechanical Operations & Rehabilitation of Hydro Power Stations.

Organization / Department	Designation	Nature of Duties Assigned / Performed	Duration		Total
			From	To	
Total Experience					

5. If you have been dismissed/removed from Govt. Service by any Provincial, Federal Government Autonomous, Semi-autonomous or State Enterprises, please give below details:

Department / Org / Co	Post Held	Year	Dismissed or removed

6. If penalized by any court of Law, give details

Undertaking by Candidate

By signing below and submitting this form, I _____ s/d/w/ of _____ do hereby declare that the information I am providing in this form is accurate & true to my knowledge. In case of any information comprise herein found at any stage to be conceal, missing, untrue, false or forged, my candidature can be cancelled at any stage (even after employment, if so revealed later), and I shall be liable to any legal action against me.

Date & Left Thumb Impression

Signature of Candidate

IMPORTANT
INCOMPLETE FORM AND INELIGIBLE CANDIDATES
WILL BE REJECTED SUMMARILY