	On Reduct	ATO ister'	ernment of Pakistan ORY AUTHORITY OF PAKISTAN er's National Health Complex, rk Road, Islamabad. ROLL No.																			
I		vww.dra.gov.pk bnawaz.khan@dra 9255953			<u> </u>	<u>BIO-</u>	<u>-D</u> /	<u>ATA</u>	<u>F0</u>	<u>RM</u>						(Clos	ing	date			
Ad	vertiseme	nt No:-																_		<u> </u>		
Name of Post Applied for: - RO Pay Scale																						
		ision/ Department/															· • • • •					
1)	Name: (W	/rite in capital letter	s with spellir	ng as	s pe	r Ma	atric	ula	ation (Cer	tifica	ate)			<u> </u>	-		<u> </u>				
2) Computerized (NADRA) National Identity Card (CNIC) No. of Applicant:																						
3) /	ACADEM	IC QUALIFICATIO	NS:																			
Sr. No.	Academic Qualifications	Institutions At	(Certificate issue of Ex			sued of Exami versity	claration Date ed only by the Controller (amination of sity will be accepted)					Board/ University					Div/Grade % of Marks		Principal Subjects			
						_	_															
						_																
4)	COUR	SES/TRAINING (C	Certificate, D	iplom	na,	Pos	t-Gra	adı	uate	Dip	lom	a, o	n job	train	ing	etc.)						
								ų	ST	AR	TIN	GΣ	ATE		E	NDI	NG D/	٩ΤΕ		Natu		S
Sr No			TITUTION & OCATION					DD	D M M		`	YYYY			M M		YYY	, 	Training Intern On ee Job			
								1														

5) RESEARCH/PUBLICATIONS/PAPERS/ARTICLES:

Mark 'R' in the last column of the research report/paper/article/publication, if required in the advertisement.

Sr. No.	Title	Journal/Conferences (In case of paper/article)	Publisher			Date			R
		(in case of paper/article)		D	D	MN	1 Y	Υ	

6) EXPERIENCE: (i) Start from first employment in ascending order (ii) Do you possess relevant Post-Qualification experience for the post as mentioned in the advertisement. Experience (each) claimed here must be authenticated by providing experience certificate/valid proof of that period with exact dates, job description/specification issued by the Competent Authority.

		PERIOD										STATUS					NA	TUR	ΕO	F J						
Sr. No.	NAME OF THE POST		ORGANIZATION/ MINISTRY/DIVISION/	From			(Wri you	To (Write to-date if you are still in service)			TOTAL PERIOD			Prov. Govt.	Armed Forces Semi Govt	Private	anent	orary	Officiating	Contract	Adhoc	Vages	orary	Time	Apprentice	MAIN DUTIES PERFORMED (Attach additional sheet if
S			DEPARTMENT	Day Month Year		Day	Month	Year	Days	Days Months Years		Fed. Govt.	Prov.	Armed Force Semi Govt	Priv	Permanent	Temporary	Offici	Cont	Adł	Daily Wages	Honorary	Part Time	Appre	`needed)	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16 17	7 18	19	20	21	22	23	24	25	26	27	28

				STAT	US			N	ATU	RE (DF J														
Sr. No.	NAME OF THE POST	BS	ORGANIZATION/ MINISTRY/DIVISION/	From			(Wri you	To (Write to-date if you are still in service)			TOTAL PERIOD			Prov. Govt. rmed Forces	Semi Govt.	Private	Permanent	Temporary Officiating	Contract	Adhoc	Vages	Honorary	Part Time	Apprentice	MAIN DUTIES PERFORMED (Attach additional sheet if
N N			DEPARTMENT	Day	Month	Year	Day	Month	Year	Days	Months	Years	Fed. Govt.	Prov. Govt. Armed Forces Semi Govt.		Priv	Perm	Temp	Con	Adl	Daily Wages	Hone	Part	Appre	` needed)
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15 16	17	18	19	20 21	22	23	24	25	26	27	28

Picture pasted here

7) Check List: Have you filled/attached attested copies (with name stamp of attestation officer) of all required documents as per following sequence?

Yes / No

- 1. Copy of Computerized National Identity Card (CNIC).
- 2. Latest Photograph mentioning your name and CNIC No on backside.
- 3. Copy of Matric/Secondary School Certificate (Proof of Age).
- 4. Copy of required Degrees/Diplomas/Certificates.
- 5. Proof of Post-Qualification experience.
- 6. Copy of Self Domicile Certificate.
- 7. Original Departmental Permission Certificate (For Govt. Servants).
- 8. In Case of Disabled Candidates, certificate of Disability from the Competent Authority.

8) Declaration (i): I hereby solemnly declare that I am not in possession of any domicile certificate other than ______ claimed / submitted alongwith this Biodata form for the instant case. I further declare that if I am found in possession of any domicile certificate other than the one mentioned above, I will be liable to dismissal from service any time with costs or any other penalty.

- (ii): I certify that the statements made by me in the answers to the foregoing questions 1-6 are true, complete and correct to the best of my knowledge and belief. Submission of fake/forged documents and any misrepresentation or omission discovered even after appointment may render my appointment liable to termination in addition to the action decided by the Commission. I have also carefully read the General Instructions to the candidates and I am bound by the terms and conditions contained therein.
- Note:- Attested copies of all the documents should be attached in above order and numbered in continuation of page number of Bio-data Form.



