REGISTRATION FORM



Al-Khair Global Pvt. Ltd.

Screening Test

Registration No._
To be filled by CTS



Picture 1

Paste your recent passport size color photograph not older than 6 months having blue background with gum

تصویر لازماً منسلک کریں بصورت دیگر فارم عمل میں نہی لایا جایگا۔

Eligibility Criteria:			
A. Is your Age according to the desired Post at the date of 15-05-2018?			
B. Is your Qualification according	3. Is your Qualification according to the required post?		
C. Are you Domiciled in Punjak			Yes No
If your reply is "Yes" to A, B & 0	C above, only then please proce	ed further. Otherwise you are no	t eligible to apply.
01. Post:	Acc	ounts Officer	
Personal Information:			
02. Candidate Name:			
03. Father's Name:			
04. Candidate CNIC #:		-	
05. Date Of Birth:		06. Gender:	Male Female
07. Postal Address:			
	All correspondence will be made on this address through courier service or ordinary postal service. City: District:		
08. Mobile No: Phone # (Res.)			
11. District of Domicile: Fill Only One Box (Mandatory)			
01. Attock	02. Bahawalnagar	03. Bahawalpur	04. Bhakkar
05. Chakwal	06. Chiniot	07. Dera Ghazi Khan	08. Faislabad
09. Gujranwala	10. Gujrat	11. Hafizabad	12. Jhang
13. Jehlum	14. Kasur	15. Khanewal	16. Khushab
17. Lahore	18. Layyah	19. Lodhran	20. Mandi Bahauddin
21. Mianwali	22. Multan	23. Muzzafargarh	24. Nankana Sahib
25. Narowal	26. Okara	27. Pakpattan	28. Rahim Yar Khan
29. Rajanpur	30. Rawalpindi	31. Sahiwal	32. Sargodha
33. Sheikhupura	34. Sialkot	35. Toba Tek Singh	36. Vehari

12. Academic Information:

Degree Name	Degree Title	Major Subject	Year Passing	Obtained Marks / CGPA	Total Marks/ CGPA	Board of Examination
Middle (8 Years)						
Matric (10 Years)						
Intermediate (12 or 13 Years)						
Bachelor's (14 Years)	B.Com Other:					
Masters (16 Years)						
Diploma/ Certificate						

13. Bank Online Deposit of Rs: 200/- from Designated Bank Branches.

*Note: Application Form will not be entertained without Original Deposit Slip (CTS Office Copy)

Bank Name	Bank Code	Deposit Date
MCB		

Undertaking By The Applicant:

d/s/w of	do hereby solemnly declare	
and affirm that I have read and understood the instructions and cor and I have filled-up the application form as per instructions a contained herein is found at any stage to be missing, untrue, false cancelled at any stage (even after employment, if so revealed later)	ditions for appearing in the CTS Test, coordingly. In case of any information or forged, my candidature can be and I shall be liable to legal action.	Picture 2 Paste your recent passport size color photograph not older than 6 months having blue background with gum
		تصویر لازما منسلک کریں بصورت دیگر فارم عمل میں نہی لایا جایگا۔

General Instructions:

Candidate's Signature

- · Please fill the Application Form properly with complete and correct information / answers.
- · Please DO NOT leave any field blank, otherwise your application may not be considered.
- Incorrect, false or forged information may result in cancellation of your candidature at any stage, even after employment, and also proceeding of a legal action.
- Attach Original Bank Deposit Slip (CTS Office Copy)

Thumb Impression

- · By Hand submission of Application Form is not allowed.
- Application should reach CTS office latest by last date of submission of Application Form.
- CTS will not be responsible for late receiving of application through courier / Pakistan Post etc.

Last date for submission of application form is **Tuesday 15th May, 2018.**Applications received on or after **Wednesday 16th May, 2018.** will be rejected.

Please Send Application Forms to:

CENTRAL TESTING SERVICES (CTS)
CAMP OFFICE, # 32, 3RD FLOOR, CAPITAL PLAZA
G-11/MARKAZ, ISLAMABAD

website: www.ctspak.com



Central Testing Services

serving with integrity

CTS Slip

Branch Code:	Date:		Branch Code:	Date:
Branch Name:			Branch Name:	
ONLIN	NE DEPOSIT SLIP		ONLIN	IE DEPOSIT SLIP
	osit fee in only one bank & tick the	relevant bank)	il .	sit fee in only one bank & tick the relevant bank)
A/C No. :	MCB Bank Central Testing Services 0988604131005901		Fire kr A/C Title: A/C No Note: Bar	Central Testing Services
the state of the s	required on the deposit Slip which	should be sent to CTS		required on the deposit Slip which should be sent to CT
along with the applicat	ion form		along with the applicati	ion form
*Original slip must be p	provided.		*Original slip must be p	provided.
Applicant's Name:			Applicant's Name:	
Father Name:			Father Name:	
CNIC No/ B Form No:			CNIC No/ B Form No:	
Post Name:			Post Name:	
Amount 200/-	Amount in Two Hundred R Words Non Refundable/ Non Tra		Amount 200/- Rs:	Amount in Two Hundred Rupees Only Words Non Refundable/ Non Transferable
Applicant Signature	Cashier	Officer	Applicant Signature	Cashier Officer
	Cus Central Testing Se	serv	Testing Service	es
			ate Slip	
Branch Code:	Date:			
Branch Name: _			Applicant's Name:	
0	NLINE DEPOSIT SLIP			

Father

Name:

Applicant Signature

Note*: Bank stamp is required on the deposit Slip which should be sent to CTS along with the application form

Central Testing Services.

0988604131005901

(* Please deposit fee in only one bank & tick the relevant bank)

MCB Bank

Note: Bank Service Charges Free of Cost

*Original slip must be provided.

MCB Perclas in

A/C No.:

CNIC No/ B Form No:	
Post Name:	
Amount 200/- Rs:	Amount in Two Hundred Rupees Only Words Non Refundable/ Non Transferable

Cashier

Central Testing Services

serving with integrity

Bank Slip