APPLICATION FORM

Post Applied For (BPS)		PHOTO
Name		
Father's / Husband's Name		
CNIC No.	- -	

Date of Birth	Day	Month	Year

Gender	Male ☐		Female ☐	
Marital Status	Single ☐		Married ☐	
Religion		Sect		
Province / District of Domicile				
Mailing Address				
Permanent Address				
Test Centre (One Only)	Islamabad ☐	Lahore ☐	Peshawar ☐	
	Quetta ☐	Karachi ☐	Gilgit ☐	
Telephone No.				
Mobile No.				
Email Address				
Age Relaxation (If Claimed)	Reason			
Disability (If Any)	Nature of Disability			

EDUCATIONAL QUALIFICATION

Degree	Institution	Year		Marks		Grade / Division	Major Subjects
		From	To	Obtained	Total		
Matric / SSC							
FA / F. Sc./ HSSC							
Graduation							
Masters							
Others							
Experience	Attach experience certificate (if applicable)						

P.O. BOX NO. 1214
Pakistan Meteorological Department (PMD)
Islamabad