

**APPLICATION FORM**Reg. No. _____
To be Filled by NTS**NTS District Health Authority
Khanewal**

Project ID: P-17-2681

Screening Test for various Posts

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 نہیں لایا جائیگا۔

Eligibility Criteria:

A. Is your Age according to the desired Post at the date of 14-10-2017 ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B. Is your Qualification / Experience according to the required post?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
C. Are you Domiciled in Punjab ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If your reply is "Yes" to A, B & C above, only then please proceed further. Otherwise you are not eligible to apply.

01. Bank Online Deposit of Rs: 500/- from Designated Bank Branches.

Bank Code	Deposit Date

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

02. Desired Post: Fill Only One Box for Desired Post. **(Mandatory)**

To apply for more than one posts, please use separate form with separate fee. This form will be considered valid only for the first selected post in the sequence.

01. <input type="checkbox"/> School Health & Nutrition Supervisor (BS-17)	02. <input type="checkbox"/> Assistant Entomologist (BS-16)	03. <input type="checkbox"/> Charge Nurse (BS-16)
04. <input type="checkbox"/> Refractionist (BS-16)	05. <input type="checkbox"/> Stenographer (BS-15)	06. <input type="checkbox"/> Computer Operator <input type="checkbox"/> BS-15 <input type="checkbox"/> BS-12
07. <input type="checkbox"/> Accountant (BS-14)	08. <input type="checkbox"/> Statistical Assistant (BS-11)	09. <input type="checkbox"/> Junior Clerk (BS-11)
10. <input type="checkbox"/> Junior Technician (Lab) (BS-09)	11. <input type="checkbox"/> Junior Technician (ECG) (BS-09)	12. <input type="checkbox"/> Junior Technician (Dental) (BS-09)
13. <input type="checkbox"/> Junior Technician (Medical Technician) (BS-09)	14. <input type="checkbox"/> Junior Technician (Ophthalmic) (BS-09)	15. <input type="checkbox"/> Junior Technician (LHV/MCH) (BS-09)
16. <input type="checkbox"/> Junior Technician (Microscopist) (BS-09)	17. <input type="checkbox"/> Junior Technician (Sanitary Inspector) (BS-09)	18. <input type="checkbox"/> Junior Technician (Anesthesia Assistant) (BS-09)
19. <input type="checkbox"/> Junior Technician (OTA) (BS-09)	20. <input type="checkbox"/> Junior Technician (Pharmacy Tech/Dispenser) (BS-09)	21. <input type="checkbox"/> Junior Technician (Dresser) (BS-09)
22. <input type="checkbox"/> Junior Technician (Radiographer) (Radiology & Imaging) (BS-09)	23. <input type="checkbox"/> Junior Technician (CDC Supervisor) (BS-09)	24. <input type="checkbox"/> Junior Technician (Dental Assistant) (BS-09)
25. <input type="checkbox"/> Junior Technician (X-Ray) (BS-09)	26. <input type="checkbox"/> Junior Technician (Lab Assistant) (BS-09)	27. <input type="checkbox"/> House Keeper (Female) (BS-09)
28. <input type="checkbox"/> Storekeeper (BS-06)	29. <input type="checkbox"/> Midwife (BS-05)	

Personal Information: Use CAPITAL letters and leave spaces between words.

03. Name in Full:

04. Father's Name:

05. Candidate CNIC #: - -
Write your own CNIC No. Or B Form No.

06. Gender: Male Female

07. Date of Birth: - -
Write your Correct Date of Birth otherwise you will be rejected

08. Postal Address: _____
All correspondence will be made on this address though courier service or ordinary postal service.
City: _____ District: _____

09. Phone No: (OFF) _____ (RES.) _____ (Mobile) _____
City Code - Phone No. DO NOT give your portable mobile number (which is converted from one network to another) so that SMS delivery is ensured.

10. Are you a Government Servant and applying through proper channel? Yes No
In case of Yes, please attach NOC

11. Are you a Disabled Person? Yes No
If yes, please attach Disability Certificate

12. Religion: Muslim Non Muslim
If Non Muslim, Please Specify: _____

13. Do you possess postgraduate diploma in Medical Entomology & Disease vector Control? Yes No
For the posts against Sr. No 02

14. Are you registered Midwife with Pakistan Nursing Council? Yes No
For the posts against Sr. No 03 & 15 & 29

15. Are you computer literate? Yes No

16. Are you proficient in MS Office? Yes No
For the posts against Sr. No 09

17. Do you possess 2 years diploma / certificate in relevant allied health sciences discipline from recognized board? Yes No
For the posts against Sr. No 10 to Sr. No 26

18. Do you possess diploma in Midwifery Punjab Medical Faculty Lahore? Yes No
For the posts against Sr. No 29

19. Desired Test City: Fill Only One Box (Mandatory)

(Subject to a minimum of 200 candidates, other wise the candidates will be assigned next nearest test city)

01. Islamabad / Rwp 02. Lahore 03. Khanewal 04. Multan 05. Faisalabad

20. District of Domicile: Fill Only One Box (Mandatory)

01. <input type="checkbox"/> Attock	02. <input type="checkbox"/> Bahawalnagar	03. <input type="checkbox"/> Bahawalpur	04. <input type="checkbox"/> Bhakkar
05. <input type="checkbox"/> Chakwal	06. <input type="checkbox"/> Chiniot	07. <input type="checkbox"/> Dera Ghazi Khan	08. <input type="checkbox"/> Faisalabad
09. <input type="checkbox"/> Gujranwala	10. <input type="checkbox"/> Gujrat	11. <input type="checkbox"/> Hafizabad	12. <input type="checkbox"/> Jhang
13. <input type="checkbox"/> Jhelum	14. <input type="checkbox"/> Kasur	15. <input type="checkbox"/> Khanewal	16. <input type="checkbox"/> Khushab
17. <input type="checkbox"/> Lahore	18. <input type="checkbox"/> Layyah	19. <input type="checkbox"/> Lodhran	20. <input type="checkbox"/> Mandi Bahauddin
21. <input type="checkbox"/> Mianwali	22. <input type="checkbox"/> Multan	23. <input type="checkbox"/> Muzaffargarh	24. <input type="checkbox"/> Nankana Sahib
25. <input type="checkbox"/> Narowal	26. <input type="checkbox"/> Okara	27. <input type="checkbox"/> Pakpattan	28. <input type="checkbox"/> Rahim Yar Khan
29. <input type="checkbox"/> Rajanpur	30. <input type="checkbox"/> Rawalpindi	31. <input type="checkbox"/> Sahiwal	32. <input type="checkbox"/> Sargodha
33. <input type="checkbox"/> Sheikhupura	34. <input type="checkbox"/> Sialkot	35. <input type="checkbox"/> Toba Tek Singh	36. <input type="checkbox"/> Vehari

21. Academic Information: (Please attach copies of your academic certificates)

- Note: 1. NTS will not issue Roll No Slips to those who have not filled in their academic record properly.
 2. Candidate should convert their grades into marks. (O Level / A Level or any other degree having grade).
 3. Write exact degree name & major subject mention in certificate / transcript.
 4. Result awaiting candidates are not eligible.

Certificate / Degree Level	Degree Title	Specialization / Major Subject	Year Passing	Obtained Marks / CGPA	Total Marks / CGPA	Board / University / Institute
Matric (10 Years)	<input type="checkbox"/> Matric <input type="checkbox"/> Other: _____	<input type="checkbox"/> Science <input type="checkbox"/> Arts <input type="checkbox"/> Other: _____				
Intermediate / D.A.E (12 / 13 Years)	<input type="checkbox"/> F.A <input type="checkbox"/> F.Sc <input type="checkbox"/> D.A.E <input type="checkbox"/> ICS <input type="checkbox"/> Other: _____	<input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Other: _____				
Bachelor (14 Years)	<input type="checkbox"/> B.A <input type="checkbox"/> B.Sc <input type="checkbox"/> B.Com <input type="checkbox"/> BCS <input type="checkbox"/> Other: _____	<input type="checkbox"/> Biology <input type="checkbox"/> Zoology <input type="checkbox"/> Microbiology <input type="checkbox"/> Molecular Biology <input type="checkbox"/> Environmental Health <input type="checkbox"/> Agriculture (Entomology) <input type="checkbox"/> Medical Technology <input type="checkbox"/> Vision Science(Refractionist) <input type="checkbox"/> Vision Science(Optometyrt) <input type="checkbox"/> Other: _____				
Bachelor (Hons) / Master (16 Years)	<input type="checkbox"/> M.A <input type="checkbox"/> BS (Hons) <input type="checkbox"/> MBA <input type="checkbox"/> MPA <input type="checkbox"/> B.Sc (Hons) <input type="checkbox"/> Other: _____	<input type="checkbox"/> Nutrition <input type="checkbox"/> Sociology <input type="checkbox"/> Economics <input type="checkbox"/> Psychology <input type="checkbox"/> Social Work <input type="checkbox"/> Political Science <input type="checkbox"/> Zoology <input type="checkbox"/> Nursing <input type="checkbox"/> Other: _____				
MS / M.Phil (18 Years)	<input type="checkbox"/> MS <input type="checkbox"/> M.Phil <input type="checkbox"/> MBA <input type="checkbox"/> MPA <input type="checkbox"/> Other: _____					
Higher (If Any)						

22. Employment Record: (Please attach copies of your experience certificates)

Sr #	Organization / Employer Name	Job Title	Job Duration Write only Month & Year	
			From	To
01				
02				
03				

23. Total Job Experience as on closing date of application: Days - Months - Years

Undertaking By The Applicant:

I _____ d/s/w of _____ do hereby solemnly declare and affirm that I have read and understood the instructions and conditions for appearing in the NTS Test, and I have filled-up the application form as per instructions given below. In case of any information contained herein is found at any stage to be 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 legal action.

Picture 2

Affix your recent passport size color photograph not older than 6 Months having blue background **with Stapler**

تصویر لازماً منسلک کریں بصورت دیگر فارم عمل میں نہیں لایا جائیگا۔

Date: _____ Thumb Impression _____ Candidate's Signature _____

General Instructions / Information:

- 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 your Two recent Passport Size Photographs, Copy of CNIC, Academic certificates, Disability certificate, NOC (Departmental permission certificate), Experience letter & Original Bank Deposit Slip (NTS Copy)
- By Hand submission of Application Form is not allowed.
- Mobile Phones or any Electronic Gadgets are not allowed in Test Center premises.
- Use separate envelope and separate application form for each post you are applying for.
- Last date for submission of application form is **Saturday 14th October, 2017.**
- Applications received on or after **Sunday 15th October, 2017** will be rejected.
- Application should reach NTS office latest by last date of submission of Application Form.
- NTS will not be responsible for late receiving of application through courier / Pakistan Post etc.

HELP LINE:

UAN : +92-51-844-444-1
Website : www.nts.org.pk

Please Send Application Forms to:

NATIONAL TESTING SERVICE

DHA KHANEWAL (Project)
Plot # 96, Street # 4, H-8/1, Islamabad.

Keep Visiting NTS Website



National Testing Service-Pakistan
Building Standards in Educational and Professional Testing

NTS COPY

District Health Authority Khanewal

Branch Code: _____ Date: _____

Branch Name: _____

ONLINE DEPOSIT SLIP

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

<input type="checkbox"/>	Allied Bank Limited <small>Formerly Allied Bank of Pakistan Limited</small>	<input type="checkbox"/>	<input type="checkbox"/>	Muslim Commercial Bank	<input type="checkbox"/>
A/C Title: NTS-Pakistan-Collection		A/C Title: NTS-Pakistan		A/C Title: NTS-Pakistan	
A/C No: 0010008325640018		A/C No: 0647943831005734		A/C No: 0647943831005734	
Note: Bank Service Charges Free of Cost		Note: Bank Service Charges Free of Cost		Note: Bank Service Charges Free of Cost	
<input type="checkbox"/>	Meezan Bank <small>The Premier Islamic Bank</small>	<input type="checkbox"/>	<input type="checkbox"/>	HBL <small>HABIB BANK</small>	<input type="checkbox"/>
A/C Title: National Testing Service-Pakistan		A/C Title: NTS Pakistan		A/C Title: NTS Pakistan	
A/C No: 0101820001		A/C No: 00427991771403		A/C No: 00427991771403	
Note: Bank Service Charges Free of Cost		Note: Bank Service Charges Free of Cost		Note: Bank Service Charges Free of Cost	

*Note: Desired Bank Stamp is required on the Deposit Slip & Send Original Deposit Slip (NTS Copy) along Application Form to NTS Office

Application Form will not be entertained without Original Deposit Slip (NTS Copy)

Project ID: P-17-2681		
Applicant's Name:		
Father Name:		
CNIC No/ B Form No:		
Post Name:		
GST INVOICE		
NTN #	2680612-6	
GST #	3277876121192	
NTS fee: 431/-	Amount in word: Rs. Five Hundred Rupees Only Non Refundable/ Non Transferable	
GST@ 16%: 69/-		
Total: 500/-		
Applicant Signature	Cashier	Officer



National Testing Service-Pakistan
Building Standards in Educational and Professional Testing

BANK COPY

District Health Authority Khanewal

Branch Code: _____ Date: _____

Branch Name: _____

ONLINE DEPOSIT SLIP

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

<input type="checkbox"/>	Allied Bank Limited <small>Formerly Allied Bank of Pakistan Limited</small>	<input type="checkbox"/>	<input type="checkbox"/>	Muslim Commercial Bank	<input type="checkbox"/>
A/C Title: NTS-Pakistan-Collection		A/C Title: NTS-Pakistan		A/C Title: NTS-Pakistan	
A/C No: 0010008325640018		A/C No: 0647943831005734		A/C No: 0647943831005734	
Note: Bank Service Charges Free of Cost		Note: Bank Service Charges Free of Cost		Note: Bank Service Charges Free of Cost	
<input type="checkbox"/>	Meezan Bank <small>The Premier Islamic Bank</small>	<input type="checkbox"/>	<input type="checkbox"/>	HBL <small>HABIB BANK</small>	<input type="checkbox"/>
A/C Title: National Testing Service-Pakistan		A/C Title: NTS Pakistan		A/C Title: NTS Pakistan	
A/C No: 0101820001		A/C No: 00427991771403		A/C No: 00427991771403	
Note: Bank Service Charges Free of Cost		Note: Bank Service Charges Free of Cost		Note: Bank Service Charges Free of Cost	

*Note:

1. Please Stamp both copies of deposit Slip.
2. The Bank Must Return "NTS Copy" to the Candidate.
3. Deposit Slip will not accepted without Candidate CNIC/ B Form No.

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National Testing Service-Pakistan
Building Standards in Educational and Professional Testing

CANDIDATE COPY

District Health Authority Khanewal

Branch Code: _____ Branch Name: _____ Date: _____

ONLINE DEPOSIT SLIP

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

<input type="checkbox"/>	Allied Bank Limited <small>Formerly Allied Bank of Pakistan Limited</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meezan Bank <small>The Premier Islamic Bank</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HBL <small>HABIB BANK</small>	<input type="checkbox"/>	
A/C Title: NTS-Pakistan-Collection		A/C Title: NTS-Pakistan		A/C Title: National Testing Service-Pakistan		A/C Title: NTS Pakistan		A/C Title: NTS Pakistan		A/C Title: NTS Pakistan	
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