

Office of the District & Sessions Judge Faisalabad

Screening Test for Stenographer

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 13-09-2019?

 Yes

 No

B. Is your Qualification according to the required post?

 Yes

 No

C. Are you Domiciled in Punjab?

 Yes

 No

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

01. Post:

Stenographer (BPS-16)

Personal Information (Fill in BLOCK LETTERS):

02. Candidate Name:

نام

03. Father's Name:

والد کا نام

04. Candidate CNIC #:

 - -

قومی شناختی کارڈ نمبر

05. Date Of Birth:

 - -

پیدائش کی تاریخ

Day

Month

Year

06. Gender:

صنف

 Male

 Female

07. Postal Address:

ڈاک کا پتہ

All correspondence will be made on this address through courier service or ordinary postal service.

City: _____ District: _____

08. Mobile No: _____

Phone # (Res.) _____

09. Religion:

مذہب

 Muslim

 Non-Muslim

10. Are you Disabled Person?

If yes, please attach Disability Certificate

 Yes

 No

11. Do you want to claim age relaxation? (In case of Yes, please attach reason)

 Yes

 No

12. Are you a Government Servant and applying through proper channel?

In case of Yes, please attach NOC

 Yes

 No

13. Are you an in-service employee in Civil or Sessions Court Faisalabad?

 Yes

 No

14. Are you son/daughter of in-service/retired employee in Civil or Session Court Faisalabad? (if yes then attach affidavit)

 Yes

 No

15. Is any of your relative employed in Civil or Sessions Court Faisalabad? (if yes then attach affidavit)

 Yes

 No

16. Are you applying against women quota?

 Yes

 No

17. Are you applying against disabled quota?

 Yes

 No

18. Are you applying against minority quota?

 Yes

 No

19. 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"/> Jehlum	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"/> Muzzafargarh	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"/> Sheikhpura	34. <input type="checkbox"/> Sialkot	35. <input type="checkbox"/> Toba Tek Singh	36. <input type="checkbox"/> Vehari

20. Academic Information (If Any):

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

21. Employment Record (If Any):

Sr #	Organization / Employer Name	Job Title	Job Duration	
			From	To
01				
02				
03				

22. Total Job Experience: Years - Months

23. Additional Skills (If Any):

Sr #	Skill Name	Description
01		
02		
03		

24. Bank Online Deposit of Rs: 400/- from Designated Bank Branches.

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

Bank Name	Bank Code	Deposit Date
<input type="checkbox"/> MCB <input type="checkbox"/> UBL <input type="checkbox"/> NBP <input type="checkbox"/> Bank Alfalah		

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 CTS Test, and I have filled-up the application form as per instructions accordingly. 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
Paste your recent
passport size color
photograph not older than
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تصویر لازماً منسلک کریں بصورت
دیگر فارم عمل میں نہیں لایا جائیگا۔

Date: _____ Thumb Impression _____ Candidate's Signature _____

General Instructions:

- 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)
- 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 **Friday 13th September, 2019.**
Applications received on or after **Saturday 14th September, 2019.** will be rejected.

Please send Application Forms To:
CENTRAL TESTING SERVICES (CTS)

OFFICE # 414, F2, JEFF HEIGHTS
GULBERG III, MAIN BOULEVARD, LAHORE

website: www.ctspak.com

Bank Copy**Central Testing Services**

serving with integrity

Project Name: DSJ Faisalabad**Original slip must be provided.**(* Please deposit fee in only one bank & tick the relevant bank)*

Branch Code: _____ Date: _____

Branch Name: _____

	Bank Alfalah	<input type="checkbox"/>
A/C Title:	Central Testing Services	
A/C No. :	0044-1006496947	
<small>Note: Bank Service Charges Free of Cost</small>		

	National Bank of Pakistan	<input type="checkbox"/>
A/C Title:	Central Testing Services	
A/C No. :	4152493902	
<small>Note: Bank Service Charges Free of Cost</small>		

	United Bank Limited	<input type="checkbox"/>
A/C Title:	Central Testing Services	
A/C No. :	251609182	
<small>Note: Bank Service Charges Free of Cost</small>		

	MCB	<input type="checkbox"/>
A/C Title:	Central Testing Services	
A/C No. :	0988604131012692	
<small>Note: Bank Service Charges Free of Cost</small>		

Applicant's Name: <small>(Required*)</small>
Father Name: <small>(Required*)</small>
CNIC No/ B Form No: <small>(Required*)</small>
Post Name: <small>(Required*)</small>

Note: Bank stamp is required on the deposit Slip.**All the fields on the right are required. Incomplete deposit slip will not be entertained.*

Amount Rs:	400/-	Amount in Words	Four Hundred Rupees Only
<small>Non Refundable/ Non Transferable</small>			

Applicant Signature_____
Cashier_____
Officer**CTS Copy****Central Testing Services**

serving with integrity

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