Picture



SHAIKH ZAYED ISLAMIC CENTRE

UNIVERSITY OF PESHAWAR

Application Form for Employment

BPS-17 & Above

1. §	ubject:_								
Instructions:		This application form, duly completed should be submitted to the Director Shaikh Zayed Islamic Centruliversity of Peshawar on or before the due date i.e. <i>09-02-2023</i> along-with attested photocopies certificates, degrees, detail marks certificate, domicile and other relevant documents. An amount of Rs.2,000/- for BPS-17 & 18 and Rs.2,500/- for BPS-19 & above through Bank receipt or Ba Draft should be deposited in favour of <i>Director</i> , Shaikh Zayed Islamic Centre, University of Peshawar A/C No. 1487-00050229-01, HBL, Agriculture University Branch Peshawar. Research Papers evaluation fee Rs.4,500/- for the post of Professor and Associate Professor should I deposited in favour of Director Shaikh Zayed Islamic Centre, University of Peshawar, in addition to F 600/- to be deposited in A/C No. 1487-00050229-01, HBL Agriculture University Branch, Peshawar favour of the Director, Shaikh Zayed Islamic Centre, University of Peshawar. Persons already in employment should submit their application forms through proper Channel along-wi							
		NOC issued by the competent authority. iv. Incomplete application forms and those received after the due date will not be entertained.							
		v. Use additional sheets, if required.							
1.	NAME	in block letters)							
2.	FATHE	'S Name							
3.	ADDRE	ADDRESS AND OTHER PARTICULARS:							
	(i)	For correspondence (interview Call)							
		MobilePh. No.							
	(ii)	Permanent Home Address:Ph. No.							
	(iii)	E-Mail Address: Gender							
	(iv)	Province of Domicile(v) Nationality							
	(vi)	Marital Status (vii) Date of Birth							

/ Attempt S# Name of Board / Exam. with year of Division Marks **Total Marks** University passing distinction Obtained 1. 2. 3. 4. 5. 6. 7. 8.

FORMAL TRAINING OR EDUCATION:

S#	Name of Institution	Type of Training	Period		Certificate or Diploma obtained		
			From	to			

5. RESEARCH: Give particulars of all post-graduate research work done. Mention name of Institution and Professor under whose guidance research completed.

S#	Nature of Research	Name of Institution	Name of Professor

6. RESEARCH PAPERS: Attach list of Research Papers as per specimen and attested photocopy of title of journal with each research paper

S#	Title of Research Paper	Name of Journal with ISSN No./ISNB No	Vol. No & Page No.	Categorized by HEC as W/X/Y/Z	Date of publication	Principal or co-author

7. <u>EMPLOYMENT RECORD:</u>

S#	Name of Institute / Organization	Period	Designation	BPS	Job Description	Nature of Job
		From – To			(Teaching / Research /	(Permanent / Temporary
					Admin)	

	COLUNITO	IEC VICITED.		
S#		of Country	Duration	Purpose of Visit
	Reference	ces:		
	·/ .			
	ii)			
. :	State any	y other relevant facts. Attac	ch additional sheet, if required.	
	List of at	tested documents attached	i.	
	ars (if an tion, at a	y) furnished along-with it	, are correct & true in all respec	n this application form, all the addition to the control of the control of the control of the competent authority
ticula orma	ointment			

Attach list of Miscellaneous Teaching or Administrative Experience, if any.

8.