



**OFFICE OF THE DIRECTOR
INSTITUTE OF KIDNEY DISEASES
HAYATABAD PESHAWAR**

Application form for Pharmacist

2x Attested
Photos

Post Applied for: _____

Instruction: This application form, duly completed should be submitted to the office of Director IKD, Hayatabad Peshawar on or before the due date along with.

- i. Attested photocopies of certificates, degrees, detail marks certificates, domicile and other relevant documents.
- ii. Persons already in employment should submit their application forms through proper channel along-with NOC issued by the competent authority.
- iii. Incomplete application forms and those received after the due date will not be entertained.
- iv. Use additional sheets, if required.
- v. **Whatsapp number is mandatory.**

1. **Name (in block letters)** _____

2. **Father's Name** _____

3. **Address and other particulars:**

i. For correspondence (interview call):

.....

ii. Permanent Home Address:

.....

iii. Date of Birth: iv. Marital Status:

v. District of Domicile: vi. Nationality:

vii. Province: viii. Religion:

ix. Mobile: x. Whatsapp:

xi. Phone No: xii. Email:

1. **Educational Qualification:**

S#	Certificate/Degree	Name of Board/ University	Exam. with year of passing	Division/ Distinction	Attempt	Obtained Marks/ CGPA	Total Marks
1.	SSC/equivalent						
2.	FSc/equivalent						
3.	BA/BSc/equivalent						
4.	MA/MSc/equivalent						
5.	Other						
6.							

Applicant's Signature: _____

2. Formal Training or Education:

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

3. Research Papers: Attach list of Research Papers as per specimen and attested photocopy of title journal with research paper.

S #	Title of Research Paper	Name of Journal	Date of Publication	Principal or co-author

4. Employment Record (Starting from the Present Position):

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

Applicant's Signature: _____

- 5. Attach List of Miscellaneous Teaching or Administrative Experience, if any.
- 6. Membership of Learned Societies and other Achievements in the University, Public or International Affairs, if any.

7. List of attested documents attached.

Page No.

- Bio-data 4
- Matric (S.S.C.) _____
- Intermediate (F. A/ F.Sc.) _____
- B. A/ B.Sc. _____
- M. A/ M.Sc. _____
- Detail Marks Sheet(DMC) _____
- MeritCertificates _____
- ExperienceCertificates _____
- DomicileCertificate _____
- C.N.I.C _____
- Character Certificate of the Academic Institution last attended _____
- Certificate of character from two responsible persons _____
(Not from relative, who are well acquainted with his character and antecedents)
- _____ _____
- _____ _____
- _____ _____
- _____ _____

Applicant's Declaration:

I, Dr./Mr./Ms....., hereby solemnly declare that all the entries in this application form, all the additional particulars (if any) furnished along-with it, are true & correct to the best of my knowledge & belief and that nothing have been concealed.

Note: For any correspondence candidates will be called through given **Contact / Whatsapp Number** or email or mailing address. Please keep visit IKD website i.e. www.ikdpeshawar.gkp.pk.

Signature of the Candidate

Dated: ____/____/____