



Institute of Space Technology

Application Form

IST-CSET-01/00

Computer number: _____

(For office use only)

1. APPLICATION INFORMATION:

- a. Post Applied For : _____
b. Pay Scale of Applied Post : _____
c. Date of Advertisement : _____
d. NOC (In case of Govt. Servants): _____
e. Applied Through Proper Channel: _____

Photo

2. PERSONAL INFORMATION:

- a. Name of Applicant: _____ b. Father's Name: _____
c. CNIC No: _____ d. Religion: _____
e. Date of Birth: _____ f. Age (as on closing date of ad): _____
g. Nationality by Birth : _____ h. Dual Nationality (if any): _____
i. Domicile (District): _____ j. Marital Status: _____
k. Tele No. (Office): _____ l. Tele No. (Residence): _____
m. Cell No. : _____ n. Additional Cell No. (if any): _____
o. Next of Kin / Relative Cell No. (For contact in case of any emergency): _____
p. Email Address: _____
q. Present Address: _____
r. Permanent Address: _____

3. MEDICAL CATEGORY:

- a. Admission in Hospital in last five (05) years: _____
b. Reason of admission: _____
c. Type of disability (If any): _____

4. SERVICE RECORD (For Ex-Govt / Ex-Servicemen only):

- a. Date of commission (If applicable): _____
b. Date of retirement: SOD: _____ SOS: _____
(Date of Struck of Duty) (Date of Struck of Strength)
c. Date of joining Govt service (If applicable) : _____
d. Date of Leave Preparatory to Retirement (LPR) (If applicable): From _____ To _____
e. Name of Govt / Armed Forces Organization: _____
f. Last Rank from Govt / Armed Forces at the time of retirement: _____
g. Status of retirement from Govt / Armed Forces / NCA Organization:
(1) Voluntary Retirement (Yes/No): _____ (2) Superannuation Retirement (Yes/No): _____
(upon attaining 60 years of age)
h. Have you ever resigned from the service of any Govt / Armed Forces / NCA Organization:
(1) Yes: _____ (2) No: _____ (3) Name of Organization: _____
(4) In case your answer is yes, then please mention the reason(s) for your resignation: _____
i. Have you ever been terminated from the service of any Govt / Armed Forces / NCA Organization:
(1) Yes: _____ (2) No: _____ (3) Name of Organization: _____

(4) In case your answer is yes, then please mention the reason(s) for your termination from service: _____

NOTE: (Please attach retirement / release order if retired from armed forces / government service).

5. SPOUSE DETAILS:

- a. Religion : _____ b. Nationality: _____
c. Dual Nationality (if any): _____ d. Profession / Occupation: _____

6. FAMILY/ DEPENDENT(S) IN FOREIGN MISSION:

Does any of your family member(s) who is/are dependent on you and/or residing with you, working in foreign mission:

Yes ☐ No ☐

If yes, then please provide the following details:

- a. Name: _____ b. Relationship with you: _____
c. Profession/Occupation: _____ d. Country of foreign mission: _____
e. Date of joining the foreign mission: _____ f. Country of location: _____
g. City of location: _____ h. Dual Nationality (if any) _____
i. Tele No: _____ j. Cell No: _____
k. Additional Cell No. (if any): _____ l. Email Address: _____
m. Address: _____

7. ACADEMIC QUALIFICATION:

Certificate/ Degree	Discipline / Field	School / Board / University	Completion dd-mm-yy	Total Marks	Obtained Marks	% age	Division/ CGPA
Matric or Equivalent							
FSc or Equivalent							
BE/BS/BSc/BA							
MSc/MA/MBA							
ME/MS/M.Phil							
PhD							
Additional (if any)							

8. EXPERIENCE: Please attach documentary evidence for each experience mentioned in the table below.

Post	Organization / Institution	Type of Organization Govt. / Armed Forces / R&D / Semi Govt. / Autonomous / Private	From (D-M-Y)	To (D-M-Y)	Total no. of years, months & days	Job description

Total Experience: _____

(Note: Experience will only be reckoned if acquired after minimum prescribed qualification for the post).

10. ADDITIONAL INFORMATION:

Training / Courses / Diploma:

Ser.	Training/Course/ Diploma	Field	From (D-M-Y)	To (D-M-Y)	Duration	Institution Name	(Govt. / Private)
(1)							
(2)							
(3)							

Attachments: Educational Degrees, Transcripts & Mark Sheets (in descending order), Certificates, Experience Certificates, NOC for applying for the post from present employer, Copy of SVA form (for Retd armed persons only), Discharge Certificate / Release / Retirement Order, Domicile, School Leaving Certificate (if Under Matric), CNIC, Photograph, Fresh Resume and all supporting documents in respect of the information provided in this Faculty Application Form.

Declaration by applicant: By signing below, I acknowledge that the above information is true in all respects to the best of my knowledge. Any misinformation would render me ineligible for the induction.

Date of Application: _____

Signature of Applicant: _____

For Office Use only:

Undertaking by the HR Dept: I have checked the proforma and found that all entries have been properly filled and form is complete.

Signed by Addl Director (HR): _____

C/Signed by Director (HR): _____