



# PROJECT MANAGEMENT UNIT KHYBER PAKHTUNKHWA DONOR FUNDED PROJECT

Project ID: N-17-4325

Screening Test for the Post of

Finance Officer

**Picture 1**

Paste your recent  
passport size color  
photograph (with open face)  
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 <b>Age</b> according to the prescribed age limit for the desired Post as on <b>22-09-2017</b> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B. Do you have relevant / prescribed <b>Qualification / Experience</b> as required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
C. Are you <b>Domiciled</b> in KP / FATA?	<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: 600/- from Designated Bank Branches**

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

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

02. Name in Full:	<input type="text"/>																															
03. Father's Name:	<input type="text"/>																															
04. Candidate CNIC #:	<input type="text"/>																															
05. Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	06. Date of Birth:	D	D	M	M	Y	Y	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>												
07. Postal Address:	<input type="text"/>																															
08. Phone No: (OFF)	<input type="text"/>										(RES.)	<input type="text"/>										Mobile:	<input type="text"/>									
09. Are you a Govt. Servant / Autonomous bodies Employee?	<input type="checkbox"/> Yes										<input type="checkbox"/> No										If Yes then total years of continuous experience:	<input type="text"/>										
10. Are you a Disabled Person?	<input type="checkbox"/> Yes										<input type="checkbox"/> No										If yes, state nature of your disability:	<input type="text"/>										
11. Religion:	<input type="checkbox"/> Muslim										<input type="checkbox"/> Non Muslim										If Non Muslim, Please Specify:	<input type="text"/>										

12. Test City:

Peshawar

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

01. <input type="checkbox"/> Abbottabad	02. <input type="checkbox"/> Bannu	03. <input type="checkbox"/> Battagram	04. <input type="checkbox"/> Buner
05. <input type="checkbox"/> Charsadda	06. <input type="checkbox"/> Chitral	07. <input type="checkbox"/> Dera Ismail Khan	08. <input type="checkbox"/> Hangu
09. <input type="checkbox"/> Haripur	10. <input type="checkbox"/> Karak	11. <input type="checkbox"/> Kohat	12. <input type="checkbox"/> Kohistan
13. <input type="checkbox"/> Lakki Marwat	14. <input type="checkbox"/> Lower Dir	15. <input type="checkbox"/> Malakand	16. <input type="checkbox"/> Mansehra
17. <input type="checkbox"/> Mardan	18. <input type="checkbox"/> Nowshera	19. <input type="checkbox"/> Peshawar	20. <input type="checkbox"/> Shangla
21. <input type="checkbox"/> Swabi	22. <input type="checkbox"/> Swat	23. <input type="checkbox"/> Tank	24. <input type="checkbox"/> Tor Ghar
25. <input type="checkbox"/> Upper Dir	26. <input type="checkbox"/> FATA		

### 14. Academic Information: (Please do not attach copies of your academic certificates at this stage.)

- 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 / Sanad Title	Specialization / Major Subject	Year Passing	Obtained Marks / CGPA	Total Marks / CGPA	Board / University / Institute
<b>Matric / Equivalent</b> (10 Years)	<input type="checkbox"/> Matric <input type="checkbox"/> O' Level <input type="checkbox"/> Other: _____					
<b>Intermediate / D.A.E</b> (12 / 13 Years)	<input type="checkbox"/> F.A <input type="checkbox"/> F.Sc <input type="checkbox"/> Other: _____					
<b>Bachelor</b> (14 Years)	<input type="checkbox"/> B.A <input type="checkbox"/> B.Sc <input type="checkbox"/> Other: _____					
<b>Bachelor (Hons) / Master / Equivalent</b> (16 Years)	<input type="checkbox"/> M.A <input type="checkbox"/> M.Sc <input type="checkbox"/> Other: _____					
<b>Chartered Accountant / Equivalent</b>	<input type="checkbox"/> Chartered Accountant (ICAP) <input type="checkbox"/> Certified Chartered Accountant (ACCA) <input type="checkbox"/> Certified Public Accountant (CPA) <input type="checkbox"/> Certified Management Accountant (ICMA / CIMA) <input type="checkbox"/> Other: _____					
<b>Higher</b> (If any)						

### 15. Employment Record: (Please do not attach copies of your experience certificates at this stage)

Sr #	Organization / Employer Name	Job Title	Job Duration <small>Write only Month &amp; Year</small>	
			From	To
01				
02				
03				

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

17. Total Post Qualification 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 or false, my candidature can be cancelled at any stage (even after employment, if so revealed later), and I shall be liable to legal action.

Date: \_\_\_\_\_ Thumb Impression \_\_\_\_\_ Candidate's Signature \_\_\_\_\_

### Picture 2

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

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

## 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 or false 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 and 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 **Friday 22<sup>nd</sup> September, 2017**.
- Applications received on or after **Saturday 23<sup>rd</sup> September, 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](http://www.nts.org.pk)

Keep Visiting NTS Website

## Please Send Application Forms to:

**NATIONAL TESTING SERVICE**

PMU KP (Project)

Plot 96-E, Street No. 4, Sector H-8/1, Islamabad.



# National Testing Service-Pakistan

Building Standards in Educational and Professional Testing

**NTS COPY**

## Project Management Unit KP

Branch Code: \_\_\_\_\_ Date: \_\_\_\_\_

Branch Name: \_\_\_\_\_

### ONLINE DEPOSIT SLIP

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

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

**\*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: <b>N-17-4325</b>		
Applicant's Name: _____		
Father Name: _____		
CNIC No/ B Form No: _____		
Post Name: _____		
<b>GST INVOICE</b>		
NTN #	<b>2680612-6</b>	
GST #	<b>3277876121192</b>	
NTS fee: <b>522/-</b>	Amount in word: Rs. <b>_____ Hundred Rupees Only</b> <b>Non Refundable/ Non Transferable</b>	
GST@ 15%: <b>78/-</b>		
Total: <b>600/-</b>		
Applicant Signature _____	Cashier _____	Officer _____



# National Testing Service-Pakistan

Building Standards in Educational and Professional Testing

**BANK COPY**

## Project Management Unit KP

Branch Code: \_\_\_\_\_ Date: \_\_\_\_\_

Branch Name: \_\_\_\_\_

### ONLINE DEPOSIT SLIP

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

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**\*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.

Project ID: <b>N-17-4325</b>		
Applicant's Name: _____		
Father Name: _____		
CNIC No/ B Form No: _____		
Post Name: _____		
<b>GST INVOICE</b>		
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GST #	<b>3277876121192</b>	
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GST@ 15%: <b>78/-</b>		
Total: <b>600/-</b>		
Applicant Signature _____	Cashier _____	Officer _____



# National Testing Service-Pakistan

Building Standards in Educational and Professional Testing

**CANDIDATE COPY**

## Project Management Unit KP

Branch Code: \_\_\_\_\_ Branch Name: \_\_\_\_\_ Date: \_\_\_\_\_

### ONLINE DEPOSIT SLIP

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

<input type="checkbox"/> <b>Allied Bank Limited</b> <small>Formerly Allied Bank of Pakistan Limited</small>	<input type="checkbox"/> <b>Muslim Commercial Bank</b>	<input type="checkbox"/> <b>Meezan Bank</b> <small>The Premier Islamic Bank</small>	<input type="checkbox"/> <b>HBL</b> <small>HABIB BANK</small>
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Father Name: _____		
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NTN #	<b>2680612-6</b>	
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Applicant Signature _____	Cashier _____	Officer _____