

REGISTRATION FORM

Registration No: _____

To be filled by BTS

Picture 1
Paste your recent passport size color photograph with gluestick

Project Directorate of Cadet Colleges Balochistan

1. Are You Retired Government Servant?	_ Yes	_ NO
2. Are You a Disabled person?	_ Yes	_ NO
3. Do you have relevant / prescribed Qualification & Experience as mentioned in Advertisement?	_ Yes	_ NO

Applied for: (Fill the Box for Desired position. (Mandatory))

1. <input type="checkbox"/> Site Engineer/Resident Engineer	2. <input type="checkbox"/> Site Engineer Electric
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TEST CITY: QUETTA

1. Bank Challan of Rs: 800/- (UBL, ALFALAH, Soneri Bank, NBP)

Bank & brach code	Deposit Date:
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*Note: Application Form will not be entertained without Original Deposit Slip (BTS Copy)

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

2. Name:	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> </table>																										
3. Father's Name:	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> </table>																										
4. Candidate CNIC: (Without Dash)	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> </table>																										
5. Gender:	Male: <input type="checkbox"/>		Female: <input type="checkbox"/>																								
	D	D	M	M	Year																						
6. Date of Birth:	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> </table>																										
7. Marital Status:	Married: <input type="checkbox"/>				Unmarried: <input type="checkbox"/>																						
8. Religion:	Muslim: <input type="checkbox"/>					Non Muslim: <input type="checkbox"/>																					
9. Permanent Address:																											
10. Mailing Address:																											
Note: (All correspondence will be made on Mailing address though courier service or ordinary postal service)																											
11. Phone No: (OFF)	<input style="width: 100%;" type="text"/>				(RES):				<input style="width: 100%;" type="text"/>		Mobile: <input style="width: 100%;" type="text"/>																
12. District of Local/Domicile(compulsory):	<input style="width: 100%;" type="text"/>																										

13. Academic Information: (Please attach your attested documents)

Certificate /Degree Level	Degree Name	Major Subject	Passing Year	Obtained Marks / CGPA	Total Marks / CGPA	Institute/Board
Matric						
Intermediate						
Bachelors						
Masters						
Professional Qualification						

14. Employment Record: (Please attach your attested documents)

S.No#	Organization / Employer Name	Job Title	Job Duration Write only Month & Year	
			From	To
1				
2				
3				

Days: Months: Years:

16. Total Job Experience:

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Undertaking By The Applicant:

I hereby certify that information given in this form is absolutely true. Any information found false, may be treated as breach of trust and **I shall be liable for cancellation of my application**. It is certified that I have carefully read the form and personally filled it and I understood all the contents / columns that I have filled up.

Date: _____

Signature of the Candidate: _____

Picture 2
Affix your recent passport size color photograph with stapler

General Instructions:

- **Candidates having the required qualification and experience as mentioned in Advertisement should only apply.**
- **Please attach your attested Two recent Photographs, educational certificates, Domicile CNIC copy and Original Bank Deposit Slip (BTS Copy) only.**
- **Hand submission of Application Form is not allowed.**
- **Please fill the Application Form properly with complete information. Incomplete Forms Will not be accepted**
- **BTS will not be responsible for late receiving of applications through courier / Pakistan Post etc.**
- **Bank demand draft/Cross Cheque are not acceptable, if attached with application form, it would not be accepted.**
- **These are contract basis job.**











Help line:**Please Send Application Forms to:**

Phone Number: 051-2375110, 081-9202919

Website: www.bts.org.pk

Balochistan Testing Service
Bolan Arcade First Floor, Flat No 22-B Old
Pishin stop Model Town Quetta

Fee will not be refundable.

 Balochistan Testing Service			 Balochistan Testing Service		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">BTS Copy</div>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">Bank Copy</div>		
Branch Code: _____		Date: _____	Branch Code: _____		Date: _____
Branch Name: _____			Branch Name: _____		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">ONLINE DEPOSIT SLIP</div>					
(* Please deposit fee in only one bank & tick the relevant bank)					
 Soneri Bank		 National Bank of Pakistan			
Branch: Islamic Banking F-8 Markaz Islamabad (Branch Code 0205)		Branch: Prime Minister Sectt, Islamabad (Branch code 1732)			
A/C Title: Balochistan Testing Service		A/C No# 01550003200	A/C Title: Balochistan Testing Service		A/C NO# 4001521844
 National Bank of Pakistan		 Soneri Bank			
Branch: Prime Minister Sectt, Islamabad (Branch code 1732)		Branch: Islamic Banking F-8 Markaz Islamabad (Branch Code 0205)			
A/C Title: Balochistan Testing Service		A/C NO# 4001521844	A/C Title: Balochistan Testing Service		A/C No# 01550003200
 United Bank Limited		 United Bank Limited			
Branch: Hali Road Quetta (Branch Code 1055)		Branch: Hali Road Quetta (Branch Code 1055)			
A/C Title: Balochistan Testing Service		A/C NO# 219823113	A/C Title: Balochistan Testing Service		A/C NO# 219823113
 Bank AIFALAH Limited		 Bank AIFALAH Limited			
Branch: Model Town Quetta Branch (Br.code:0183)		Branch: Model Town Quetta Branch (Br.code:0183)			
A/C Title: Balochistan Testing Service		A/C NO# 01831004972900	A/C Title: Balochistan Testing Service		A/C NO# 01831004972900
Note: Bank Service Charges Free of Cost *Note: Desired Bank Stamp is required on the Deposit Slip & Send Original Deposit Slip (BTS Copy) along with Application Form to BTS Office Application Form will not be entertained without Original Deposit Slip (BTS Copy)			Note: Bank Service Charges Free of Cost Note: 1. Please Stamp both copies of deposit Slip. 2. The Bank Must Return "BTS Copy" to the Candidate. 3. Deposit Slip will not be accepted without Candidate CNIC/ B Form No.		
Applicant's Name:			Applicant's Name:		
Father Name:			Father Name:		
CNIC No/ B Form No:			CNIC No/ B Form No:		
Amount As: Rs. 800/-		Amount in words:	Amount As: Rs. 800/-		Amount in words:
		Eight hundred Only/- Non Refundable/ Non Transferable			Eight hundred Only/- Non Refundable/ Non Transferable
Applicant Signature _____		Cashier _____	Officer _____	Applicant Signature _____	
				Cashier _____	
				Officer _____	