

**NATIONAL UNIVERSITY OF MODERN LANGUAGES SECTOR**  
**RAWALPINDI BRANCH**

**POST:** \_\_\_\_\_

|                    |  |                     |  |                     |
|--------------------|--|---------------------|--|---------------------|
| Name               |  |                     |  | Paste<br>Photograph |
| Father's Name      |  | Spouse Name         |  |                     |
| NIC No.            |  | Domicile (District) |  |                     |
|                    |  | Domicile (Province) |  |                     |
| Date of Birth      |  | Marital Status      |  |                     |
| Religion           |  | Mobile No.          |  |                     |
| Address            |  |                     |  |                     |
| Army Unit          |  | Course (PMA etc)    |  |                     |
| Date of Retirement |  |                     |  |                     |

**QUALIFICATIONS**

| Certificate Degree | Discipline/ Subject | Passing Year | Board/ University | Grade/ Div/ CGPA |
|--------------------|---------------------|--------------|-------------------|------------------|
| PhD                |                     |              |                   |                  |
| M.Phil/MS          |                     |              |                   |                  |
| Masters            |                     |              |                   |                  |
| Bachelors          |                     |              |                   |                  |
| FA/FSc             |                     |              |                   |                  |
| Matric             |                     |              |                   |                  |
| Other              |                     |              |                   |                  |

**EXPERIENCE**

| Designation/Post | From | To | Regular/ Contract | Organization |
|------------------|------|----|-------------------|--------------|
|                  |      |    |                   |              |
|                  |      |    |                   |              |
|                  |      |    |                   |              |
|                  |      |    |                   |              |
|                  |      |    |                   |              |
|                  |      |    |                   |              |
|                  |      |    |                   |              |

As per attached documents

Total Experience \_\_\_\_\_ Years

**ANY RELATIVE(S) WORKING IN NUML**

| Name | Designation/Post | Relationship |
|------|------------------|--------------|
|      |                  |              |

(I, \_\_\_\_\_ affirm that above information is correct to the best of my knowledge and belief. I fully understand that in case of false information, my appointment is liable to be terminated and shall render me to legal and disciplinary action including dismissal from the service)

\_\_\_\_\_  
(Candidate's Signature)

Date \_\_\_\_\_