



**HUMAN RESOURCES DEPARTMENT
Medical Teaching Institution (MTI)
Khyber Teaching Hospital, Peshawar**

Ph #: 091-9224400-07 (Ext: 2015) Ph #: 091-9224306

WEBSITE: www.kth.gov.pk

mtikth

E-MAIL: establishmentkth@gmail.com

Affix your
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passport size
photograph
here

Application form for Employment

Post Applied For _____

Instruction: This application form, duly completed should be submitted to the Human Resources Department, MTI, KTH, 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 (without Bank Drafts) and those received after the due date will not be entertained.
- iv. Use additional sheets, if required.

1. Name (in block letters)

2. Father's Name

3. Address and other particulars:

i. For correspondence (interview call)

.....
Mobile Ph. No.

ii. Permanent Address:

..... Ph. No.

iii. E-Mail Addressiv. Gender:

v. Nationalityvi. Religion..... vii. Domicile.....

viii. Marital Status ix. Date of Birth

ix. CNIC #

x. Next of kin (**Name & Address**):

Relationship: _____ Contact #:

xi. **Education: Commencing from the Matriculation or Equivalent Examination.**

| S.# | Certificate / Degree | Name of Board / University | Exam. With year of passing | Division / Distinction / GPA | Attempt (Regular/ Supply) | % Marks Obtained |
|-----|----------------------|----------------------------|----------------------------|------------------------------|---------------------------|------------------|
| 1. | | | | | | / |
| 2. | | | | | | / |
| 3. | | | | | | / |
| 4. | | | | | | / |



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4. Formal Training or Diploma :

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

5. Employment Record / Experience after Graduation/Diploma (in chronological order, starting with latest employment)

| Employer's (Institution / Organization) Name | Designation | Reason For Leaving | From | To | Total Length of Service |
|--|-------------|--------------------|------|----|-------------------------|
| | | | | | |
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| | | | | | |

- Were you ever dismissed or asked to leave your job? Yes No
- Can we approach your present employer? (If any) Yes No
- Have any criminal charges being brought against you? Yes No

If yes, please give the details:

6. Membership of Learned Societies and other Achievements in the University, Public or International Affairs, if any.....

7. Countries Visited:

| Sr. No | Name of Country | Duration | Year | Purpose of Visit |
|--------|-----------------|----------|------|------------------|
| | | | | |
| | | | | |

8. Please give at least two references in the space provided below:

| Name | Designation | Present Address | Contact # |
|------|-------------|-----------------|-----------|
| | | | |
| | | | |



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9. Name and position of any relative working with this institution:

Check list for applicant:

Please attach copies of the following documents:

1. One copy of Computerized National Identity Card.
2. One color photograph.
3. Copies of educational documents.
4. Copies of experience Certificates.
5. Copies of DMCs
6. Copy of CV/Bio-Data.
7. Passport Photocopy if CNIC is not available
8. Domicile Certificate
9. Other (Please specify)

| |
|--------------------------|
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| <input type="checkbox"/> |

Please Read This Statement Carefully

I hereby declare that all the entries in this application form (documents), all the additional particulars (if any) furnished along with it, are true to the best of my knowledge and belief. I understand that incomplete form will be sufficient ground to reject my job application form.

Name & Signature of the Candidate

Dated: / / 2021