

FAISALABAD ELECTRIC SUPPLY COMPANY

APPLICATION FORM FOR THE POST OF COMPANY SECRETARY

PHOTOGRAPH

1 DEDSONAI	. INFORMATION:			
Name	INI ORMATION:			
Father's Nar	ne			
Date of Birt	h		Nationality	
Date of Birt	••		Nationality	
Domicile			Religion	
CNIC No.				
Postal Address				
l l				
Permanent Address				
Addiess				
2. CONTACT N	10:			
Residence			Office	
Mobile		E-mail		
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Sr. No	Qualification	Discipline	University/Institute	Year of passing	Division	Remarks
1						
2						
3						
4						
5						
6						

Computer	
Proficiency	

4. WORK EXPERIENCE: (Please begin from the latest)

Sr. No	Organization	Position held	From	То	Nature of work/Area of specialization
1					
2					
3					
4					
5					
6					
7					

5. DECLATATION:

I HEREBY DECLARE THAT INFORMATION GIVEN IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLWDGE. I FULLY UNDERSTAND THAT IN THE EVENT OF MY BEING EMPLOYED WITH FESCO AND/OR DURING THE COURSE OF MY EMPLOYMENT WITH FESCO, ANY ACT SUBVERSIVE TO THE DISCIPLINE OF FESCO WILL BE SUFFICIENT CAUSE FOR MY TERMINATION / DISMISSAL IN ACCORDANCE WITH THE LAW.

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	TURINER D	PEGLARE	INALIF	EMPLU I ED	WIIN FESCU,	I SHALL	ALWAI 3:-

- a) WORK IN THE INTEREST OF FESCO;
- b) ABIDE BY THE RULES OF FESCO &

c) MAINTAIN DISCIPLINE IN ALL RESPECTS						
Date	Place	Signatures of Applicant				
(Note: Any	information not provided will	render the application incomplete and liable for				
rejection)						