

**APPLICATION FORM FOR THE POST OF DIRECTOR GENERAL
MARKET IMPLEMENTATION & REGULATORY AFFAIRS
DEPARTMENT (MIRAD) FESCO**



(Photograph)

1. Post applied for _____

2. Name _____

3. Father's Name _____

4. Date of Birth _____

5. Nationality _____

6. CNIC No. _____

7. National Tax No. _____

8. Full Mailing address (with Telephone-landline & Mobile No. and E-Mail address)

9. Educational & Professional Qualification (From Graduation)

S. No	Qualification	Subjects	University/Institute	Year of Passing	Division/Class
1.					
2.					
3.					

10. Work Experience

S.No.	Organization	Post	Period (From -		Nature of Work/ Area
1.					
2.					
3.					

11. Fitness and propriety for the job in line with the Fit and Proper Criteria (not more than 500 words):

Signature:

Full Name (in Block Letters),
Designation, NIC Number,
and Full Address

Date _____

(Note: Any information not provided will render the application incomplete and liable for rejection.)