**QUAID-I-AZAM UNIVERSITY, ISLAMABAD**

(Administration Section)

Ph: 0092 + 051 – 90644078/9

**APPLICATION FORM FOR INTERNSHIP**

**PERSONAL INFORMATION**

1. Name of Applicant

2. Father’s Name

3. Date of Birth 4. Age on closing date

5. CNIC No. 6. Domicile

7. Postal Address

 8. Contact No.

9. Marital Status (Married / Un-married) 10. Religion

11. Qualification

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| --- | --- | --- | --- | --- | --- |
| **Ser** | **Degree/ Certificate** | **Session /Year** | **Subject Studied** | **Division /Grade** | **Board / University** |
| a. |  |  |  |  |  |
| b. |  |  |  |  |  |
| c. |  |  |  |  |  |
| d. |  |  |  |  |  |
| e. |  |  |  |  |  |
| f. |  |  |  |  |  |

**EXPERIENCE (if any)**

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| --- | --- | --- | --- | --- |
| **Post Held** | **BPS** | **Name of Institution** | **Period** | **Job Profile / Salient Assignments** |
| **From** | **To** | **Total** |
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**Declaration**

The information provided above is correct/true to the best of my knowledge and in case of any wrong/ incorrect information, action under the rules may be taken, application may not be considered & internship at any stage may be terminated.

Signature