

Date:_____

UNIVERSITY OF JHANG

12-KM CHINOT ROAD, JHANG

JOB APPLICATION FORM

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eligion:	Domicile (D	District):			
ender :	Age:	(Years / Month	/ Day)	
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DUCATIONAL QUA		ached the copies o	of Attested Doc	cuments)	
Degree/Certificat	e Year Univ	Year University/Board		Div/Grade(GPA)	
XPERIENCE: (Attack	ned the copies of Attest No of Years	ted Documents) Field of W	ork	Designation	
omputer Literacy / sk	ills				

Signature of applicant_____