| INSTITUTE OF BLOOD TRANSFUSION SERVICE PUNJAB, LAHORE | | | | | | | |
|---|--|----------|-------|---------|--|--|--|
| APPLICATION FORM FOR APPOINTMENT AS JUNIOR TECHNICIAN | | | | | | | |
| Name and Father's Name | | | | CNIC No | | | |
| Date of Birth | | Domicile | | | | | |
| Address | | | | | | | |
| Contact No | | | Email | | | | |

| Qualification | Name of Institution | Passing Year | Total Marks | Obtained | Percentage |
|---------------------|---------------------|-----------------|-------------|----------|------------|
| Matric (Science) | | | | | |
| Intermediate | | | | | |
| MLT Diploma | | | | | |
| B.Sc (MLT) | | | | | |
| M.Phil | | | | | |
| Hifz-e Quran | | | | | |
| Other | | | | | |

| Disability (if any) | | | | | Disabili | ity certificate (Instit | ution & Date) |
|--|-------------------|-------------|--|--|----------|-------------------------|---------------|
| Application Quota (Tick Only One) | 🗆 Open Merit | Transgender | | |] Female | □ Minority | 🗆 Disability |
| Experience in blood bank | Years Institution | | | | | | |
| Attested Photocopy Attached: Copy of CNIC All Qualification Certificates & Degrees | | | | | | | |

 \Box Domicile Certificate \Box Hifz-e Quran Certificate \Box Disability Certificate

Submission Date

□ Two Passport Size Photographs □ Other _____

(To be filled by the office)