

DATE: 11/8/2022

POSITION: Verification officer

38E
35K

Appedology

(Pvt.) Ltd.

Selected by Ben-

Joining:- 15-08-2022

Muhammad Muzaffar

Full Name (As per CNIC)

EMPLOYMENT APPLICATION FORM

PERSONAL DETAILS OF THE APPLICANT

FULL NAME(As per CNIC)	Muhammad Muzaffar														
FATHER'S NAME	Abdul Hameed														
CURRENT HOME ADDRESS	A-20/16/17, first floor, lane no.2, Delhi Colony, Karachi South.														
MARITAL STATUS	<input checked="" type="checkbox"/> SINGLE			<input type="checkbox"/> MARRIED			<input type="checkbox"/> OTHER								
PERSONAL MOBILE	0324-2145123														
RESIDENCE NUMBER															
EMERGENCY NUMBER															
D.O.B (DD/MM/YYYY)	20/Feb./1996														
RELIGION	<input type="checkbox"/> HINDU		<input checked="" type="checkbox"/> MUSLIM		<input type="checkbox"/> CHRISTIAN		<input type="checkbox"/> OTHER:								
CNIC NO.	4	2	3	0	1	-	9	1	0	2	9	4	9	-	9
CNIC VALIDITY(DD/MM/YYYY)															
EMAIL ID	muhammad785@gmail.com														
COVID VACCINATION STATUS	FIRST DOSE		<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO		SECOND DOSE		<input type="checkbox"/> YES		<input type="checkbox"/> NO				

EDUCATIONAL QUALIFICATION

LAST DEGREE	F.Sc.
PASSING DATE	2015
GRADE/CGPA/%	C
UNIVERSITY / INSTITUTE	D.A.-G.K.B.2. College.

EMPLOYMENT HISTORY

LAST EMPLOYER	Sybrid (Pvt Ltd.)	
DESIGNATION	C.S.R.	
DURATION	FROM: Nov. 2021	TO: July 2022
LAST SALARY	22000 to 25000 (Not Confirmed)	
REASON FOR LEAVING	Campaigns just wipe out	

Position applied for: _____

Salary Desired: 40,000

Last Salary Withdrawn: 22000 or more (not confirmed)

Have you ever been convicted of any offence? / Do you have any past criminal record?

YES ☐ NO ☒

Any medical ailment which could constraint your performance: No

Do you have any relative/friend currently working for Appedology Pvt. Ltd? If yes, state name & position:

Muhammad Manzoor

Preferred date of joining: As as possible u call

Desired shift timing:

Morning	Night <input checked="" type="checkbox"/>
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DETAILS OF PREVIOUS EMPLOYER (if any)

Name of contact person: _____

Designation: _____

Company Name: _____

Contact Number: _____

Email ID: _____

I certify that information contained in this application is true and complete & I acknowledge that any misleading would cease the hiring process or may result in immediate termination of employment at any point, if I am hired. I authorize the verification of any or all information listed above.

Date: 11/08/2022

Signature of Applicant: [Signature]

Candidate Evaluation Form

English Proficiency & Comprehension Test Score	NA
Typing Test (WPM)	ND

1 st Interviewer Name	OMAR ZAFAR		
Designation and Department		HR	
Detailed Remarks			
Recommendation	<input checked="" type="radio"/> YES		<input type="radio"/> No

2 nd Interviewer Name	Saad Ahmed		
Designation and Department			
Detailed Remarks	Selected		
Recommendation	<input checked="" type="radio"/> YES		<input type="radio"/> No

Overall Impression and Recommendation

Comments: 35K
