

DATE: 30/10/2023

POSITION: Tea boy



(Pvt.) Ltd.

Shahzad Ali

Full Name (As per CNIC)

EMPLOYMENT APPLICATION FORM

PERSONAL DETAILS OF THE APPLICANT

FULL NAME(As per CNIC)	Shahzad Ali														
FATHER'S NAME	Imamudin														
CURRENT HOME ADDRESS	DHA Phase 05 Near Abdulah Shah Ghazi														
MARITAL STATUS	SINGLE			MARRIED <input checked="" type="checkbox"/>			OTHER								
PERSONAL MOBILE	0327-8425739														
GENDER	Male														
RESIDENCE NUMBER	0309-4025851 Brother AL Hader														
EMERGENCY CONTACT						NAME & RELATION									
D.O.B (DD/MM/YYYY)	06/06/1999														
RELIGION	HINDU		MUSLIM <input checked="" type="checkbox"/>		CHRISTIAN		OTHER:								
CNIC NO.	4	2	3	0	1	-	6	6	6	8	3	3	2	-	3
CNIC VALIDITY(DD/MM/YYYY)	13/12/2029														
EMAIL ID															
COVID VACCINATION STATUS	FIRST DOSE		YES <input checked="" type="checkbox"/>		NO		SECOND DOSE		YES <input checked="" type="checkbox"/>		NO				

EDUCATIONAL QUALIFICATION

LAST DEGREE	
PASSING DATE	
GRADE/CGPA/%	
UNIVERSITY / INSTITUTE	

EMPLOYMENT HISTORY

LAST EMPLOYER	Health X	
DESIGNATION	Tea Boy	
DURATION	FROM:	TO:
LAST SALARY	27,000	

REASON FOR LEAVING

Extra Hours Load

Position applied for:

Tea Boy

Salary Desired:

27,000

Last Salary Withdrawn:

27,000

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:

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

Preferred date of joining:

Desired shift timing:

Morning

Night

DETAILS OF PREVIOUS EMPLOYER

Company Name:

HR Email:

HR Contact Number:

LinkedIn Profile:

Address:

Acknowledgement Section

In case any information provided by the candidate turns out to be fake, before or at the time of joining or even during the probation period, the company reserves the right to terminate services or change the Job Role or Salary Package.

I certify that the information contained in this application form 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: _____

Signature of Applicant: _____

Candidate Evaluation Form

English Proficiency & Comprehension Test Score	
Typing Test (WPM)	

1 st Interviewer Name				
Designation and Department		HR		
Detailed Remarks				
Recommendation	YES		No	

2 nd Interviewer Name				
Designation and Department				
Detailed Remarks				
Recommendation	YES		No	

Salary Recommended				
Date of Joining				

Overall Impression and Recommendation

Comments: _____
