

DATE: 30/10/2023

POSITION:



(Pvt.) Ltd.

Kashif

Full Name (As per CNIC)

EMPLOYMENT APPLICATION FORM

PERSONAL DETAILS OF THE APPLICANT

FULL NAME(As per CNIC)	Kashif Abbasi													
FATHER'S NAME	Abdul Majeed													
CURRENT HOME ADDRESS	Chishti Chaman Shah Rasool Colony													
MARITAL STATUS	SINGLE				MARRIED <input checked="" type="checkbox"/>				OTHER					
PERSONAL MOBILE	03062424003													
GENDER	Male													
RESIDENCE NUMBER	03029888136													
EMERGENCY CONTACT	03043336321						NAME & RELATION							
D.O.B (DD/MM/YYYY)	1-4-203													
RELIGION	HINDU			MUSLIM <input checked="" type="checkbox"/>			CHRISTIAN			OTHER:				
CNIC NO.	4	2	3	0	1	8	0	0	3	9	7	9	-	3
CNIC VALIDITY(DD/MM/YYYY)	640931													
EMAIL ID	Kashifabbasi02022@gmail.com													
COVID VACCINATION STATUS	FIRST DOSE				YES		NO		SECOND DOSE				YES <input checked="" type="checkbox"/> NO	

EDUCATIONAL QUALIFICATION

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

EMPLOYMENT HISTORY

LAST EMPLOYER	BYCO	
DESIGNATION	office boy	
DURATION	FROM:	TO:
LAST SALARY	25000	

REASON FOR LEAVING

Position applied for: Office Boy.

Salary Desired: _____ Last Salary Withdrawn: _____

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

No.

Preferred date of joining: 1-11-2023

Desired shift timing:

Morning ☒

Night ☐

DETAILS OF PREVIOUS EMPLOYER

Company Name: Byco.

HR Email: _____

HR Contact Number: _____

LinkedIn Profile: _____

Address: Near Hyperstar

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: 31-10-23

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: _____
