

DATE:

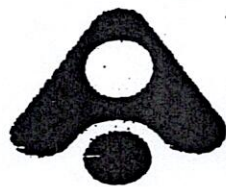
9th April 2021

POSITION:

Medical
~~Assistant~~ Billing Executive

- Skills for field
- Prior Experience
- 40K + P.D.

Inhold
30 days notice

 appedology

Pvt. Ltd.

Abdul Ghaffar Karimi

EMPLOYMENT APPLICATION FORM
(ALL DEPARTMENTS)

Offer Placed

PERSONAL DETAILS OF THE APPLICANT

NAME(as per CNIC)	Abdul Ghaffar Karimi		
FATHER'S NAME	Abdul Jabbar Karimi		
ADDRESS	Gul Houses R-122, Safra Chowangi		
MARITAL STATUS	SINGLE ☒	MARRIED	OTHER
RESIDENCE NUMBER	Jamal hostel near Iqra University BDCampus		
PERSONAL MOBILE	03343416326		
EMERGENCY NUMBER	0300-8245995		
D.O.B (DD/MM/YYYY)	08-Nov-1996		
RELIGION	HINDU	MUSLIM	CHRISTIAN OTHER:

EDUCATIONAL QUALIFICATIONS

LAST DEGREE	BBA (Honor)
PASSING DATE	30th July 2019
GRADE/CGPA/%	3.10 CGPA
INSTITUTE	International Islamic University, Islamabad

EMPLOYMENT HISTORY

LAST EMPLOYER	Claims Med Inc. (Current)	
DESIGNATION	Billing Analyst	
DURATION	FROM: 01-Jan-2020	TO: Present
LAST SALARY	35000/-	
REASON FOR LEAVING	To move to next place where I can learn more skills regarding my field & take responsibilities.	

CNIC NUMBER:

4	4	1	0	3	-	8	9	2	9	2	6	1	-	3
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

EMAIL ID	agkarimi SS@gmail.com
----------	-----------------------

Position applied for: Medical Billing Executive

Salary Desired: 45000/- Last Salary Withdrawn: 35000/-

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 Usama ~~Appa~~ Sarwar

Preferred date of joining: 9th May, 2021

Desired shift timing:

☒ Morning ☒ Night

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: 9th April-2021

Signature of Applicant: _____

