

# APPLICATION FORM

Reg No: \_\_\_\_\_



## DIRECTORATE GENERAL AGRICULTURE (Extension) KHYBER PAKHTUNKHWA, PESHAWAR



Agriculture Extension  
Government of  
Khyber Pakhtunkhwa  
حکومت خیبر پختونخوا

### Eligibility Criteria:

A. Is your age according to the prescribed age limit for the desired post?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B. Do you have requisite Qualification & Experience as mentioned in Advertisement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
C. Is your Domicile according to the desired post as mentioned in Advertisement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**PASTE YOUR RECENT  
PASSPORT SIZE  
COLOR  
PHOTOGRAPH WITH  
GUM**

If your reply is "Yes" to A, B & C above, only then please proceed further. Otherwise you are not eligible to apply.

### 01. Bank Online Deposit of Rs: 125/- from Designated Bank Branches.

\*Note: Application form will not be entertained without original deposit slip (ATS Copy)

Bank Code		Deposit Date	
-----------	--	--------------	--

### 02. Desired Post:

Fill out the boxes against the posts you want to apply. Deposit Rs.125/- against each post you want to apply.

01. <input type="checkbox"/> Office Assistant (BPS-16)	02. <input type="checkbox"/> Computer Operator (BPS-16)	03. <input type="checkbox"/> Junior Scale Stenographer (BPS-14)
04. <input type="checkbox"/> Photographer (BPS-12)	05. <input type="checkbox"/> Junior Clerk (BPS-11)	

### 03. Desired Test City:

Fill only one box (Mandatory).

01. <input type="checkbox"/> Islamabad	02. <input type="checkbox"/> Peshawar	03. <input type="checkbox"/> Kohat
04. <input type="checkbox"/> Dera Ismail Khan	05. <input type="checkbox"/> Swat	06. <input type="checkbox"/> Abbotabad

### 04. Province of Domicile:

Fill only one box for zone of Domicile (Mandatory). Domicile District: \_\_\_\_\_

Division of Zones comprising the territories mentioned on Page No. 3

01. <input type="checkbox"/> Merit	02. <input type="checkbox"/> Zone-I	03. <input type="checkbox"/> Zone-II	04. <input type="checkbox"/> Zone-III	05. <input type="checkbox"/> Zone-IV	06. <input type="checkbox"/> Zone-V
------------------------------------	-------------------------------------	--------------------------------------	---------------------------------------	--------------------------------------	-------------------------------------

### 05. Personal Information:

Use CAPITAL letters and leave spaces between words.

01. Name in Full:

02. Father's Name:

03. Candidate CNIC #:

04. Gender:  Male  Female

05. Have you any disability?  Yes  No

06. Date of Birth:

07. Email:

08. Postal Address: \_\_\_\_\_  
City \_\_\_\_\_ District \_\_\_\_\_

09. Phone No: (Res.) \_\_\_\_\_ (Mobile) \_\_\_\_\_

10. Religion:  Muslim  Non-Muslim

11. Are you a Govt serving employee?  Yes  No

12. Are you retired from Pakistan Armed Forces?  Yes  No



## 12. Undertaking by the applicant:

I \_\_\_\_\_ d/s/w of \_\_\_\_\_ do hereby solemnly declare that all the information provided by me in this application form and all the additional particulars/documents/certificates furnished along with it, are true to the best of my knowledge and belief and nothing has been concealed. I also declare that I have never been dismissed or removed from Govt service under any provincial, federal Government, autonomous and semi-autonomous or state enterprise. If any wrong or incorrect information is found later, I shall be liable to disciplinary action which may result in cancellation of my candidature and even my employment.

Date: \_\_\_\_\_ Signature of the candidate: \_\_\_\_\_

### Instructions:

- Fill the application form properly with complete and correct information.
- Do not leave any field blank, otherwise your application shall be rejected.
- Incorrect, false or forged information may result in cancellation of your candidature at any stage.
- Attach two recent passport size photograph & attested copy of CNIC.
- By hand submission of application form is not allowed.
- Test fee is non-refundable and non-transferable.

- ❖ Last Date of the submission of Application Form is **Friday, 7<sup>th</sup> February, 2020.**
- ❖ Application Form should reach ATS office latest by last date of submission of Application form.
- ❖ ATS will not be responsible for late receiving of application through courier/ Pakistan post etc.

### Zones Division:

The Province of Khyber Pakhtunkhwa is divided into five (5) Zones comprising the area listed below:

#### Zone-I:

Newly Merged Tribal Districts of Bajaur, Mohmand, Khyber, Kurram, Orakzai, North Waziristan, South Waziristan and Frontier Regions attached to the Districts of Peshawar, Kohat, Bannu and D.I. Khan.

#### Zone-II:

Districts of Peshawar, Charsadda, Nowshera, Swabi & Mardan.

#### Zone-III:

Districts of Swat, Buner, Dir, Chitral, Kohistan, Shangla Par and Malakand Area (Swat Ranizai and Sam Ranizai and Backward Areas of Hazara Division i.e

(1) Ilaqa Upper Tanawal, composed of darband area of Tehsil Haripur and Shergarh area of District Manehra.

(2) Merged areas composed of Batgram including Hill Nilshang and Thakot, Allai Kaya Khabbal and Goadoon area.

#### Zone-IV:

Districts of Dera Ismail Khan, Tank, Bannu, Lakki Marwat, Kohat and Karak.

#### Zone-V:

Districts of Haripur, Abbottabad, Mansehra, excluding their backward areas.



### Help Line:

Ph: **051-2153577-9**

Website: [www.ats.org.pk](http://www.ats.org.pk)

Email: [info@ats.org.pk](mailto:info@ats.org.pk)

### Please Send Application Forms

(Only through courier or Pakistan Post within due date)

### Manager Operations

(Project: DGAE-KPK)

### Allied Testing Services (ATS)

171-G, Street # 36, F-10/1, Islamabad.



# Allied Testing Services

**BANK COPY**

Directorate General Agriculture (Extension) KPK, Peshawar

Branch Code \_\_\_\_\_ Branch Name \_\_\_\_\_ Date \_\_\_\_\_

## ONLINE DEPOSIT SLIP

(Please deposit fee in only one bank and tick the relevant bank)

<b>HBL</b> <small>HABIB BANK</small> <input type="checkbox"/>	<b>SILKBANK</b> <input type="checkbox"/>	<b>Test Processing Fee:</b> 90/-	<b>Amount in Words: One Hundred and twenty five Rupees Only</b>  Non Refundable/ Non Transferable
A/C Title: Allied Testing Services	A/C Title: Allied Testing Services	<b>GST @ 16%</b> 15/-	
A/C No: 50127000600355	A/C No: 50915000302677	<b>Mail Service:</b> 20/-	
Note: Bank Service Charges: <b>Free of Cost</b> <b>Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office.</b>		<b>Total:</b> 125/-	

Project Id:	DGAE-KPK
Applicant's Name:	
Guardian's Name:	
CNIC No/ B Form No:	
Post Name:	

\_\_\_\_\_  
Applicant Signature                      Cashier

\_\_\_\_\_  
Officer



# Allied Testing Services

**CANDIDATE COPY**

Directorate General Agriculture (Extension) KPK, Peshawar

Branch Code \_\_\_\_\_ Branch Name \_\_\_\_\_ Date \_\_\_\_\_

## ONLINE DEPOSIT SLIP

(Please deposit fee in only one bank and tick the relevant bank)

<b>HBL</b> <small>HABIB BANK</small> <input type="checkbox"/>	<b>SILKBANK</b> <input type="checkbox"/>	<b>Test Processing Fee:</b> 90/-	<b>Amount in Words: One Hundred and twenty five Rupees Only</b>  Non Refundable/ Non Transferable
A/C Title: Allied Testing Services	A/C Title: Allied Testing Services	<b>GST @ 16%</b> 15/-	
A/C No: 50127000600355	A/C No: 50915000302677	<b>Mail Service:</b> 20/-	
Note: Bank Service Charges: <b>Free of Cost</b> <b>Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office.</b>		<b>Total:</b> 125/-	

Project Id:	DGAE-KPK
Applicant's Name:	
Guardian's Name:	
CNIC No/ B Form No:	
Post Name:	

\_\_\_\_\_  
Applicant Signature                      Cashier

\_\_\_\_\_  
Officer



# Allied Testing Services

**ATS COPY**

Directorate General Agriculture (Extension) KPK, Peshawar

Branch Code \_\_\_\_\_ Branch Name \_\_\_\_\_ Date \_\_\_\_\_

## ONLINE DEPOSIT SLIP

(Please deposit fee in only one bank and tick the relevant bank)

<b>HBL</b> <small>HABIB BANK</small> <input type="checkbox"/>	<b>SILKBANK</b> <input type="checkbox"/>	<b>Test Processing Fee:</b> 90/-	<b>Amount in Words: One Hundred and twenty five Rupees Only</b>  Non Refundable/ Non Transferable
A/C Title: Allied Testing Services	A/C Title: Allied Testing Services	<b>GST @ 16%</b> 15/-	
A/C No: 50127000600355	A/C No: 50915000302677	<b>Mail Service:</b> 20/-	
Note: Bank Service Charges: <b>Free of Cost</b> <b>Desired bank stamp is required on the deposit slip (ATS Copy) along Application Form to ATS Office.</b>		<b>Total:</b> 125/-	

Project Id:	DGAE-KPK
Applicant's Name:	
Guardian's Name:	
CNIC No/ B Form No:	
Post Name:	

\_\_\_\_\_  
Applicant Signature                      Cashier

\_\_\_\_\_  
Officer