

NOMINATION FORM FOR BASIC IT TRAINING COURSE

Basic IT Course for *:

Please select a designation.

OFFICE DETAILS:

Ministry/ Division/ Department *

Enter name of your ministry or department (Max 50 characters).

Office Address *

Enter name of your office address (Max 20 characters).

Office City *

Enter city name where office is located (Max 20 characters).

Office Phone *

Enter your office phone number (Max 20 characters).

Designation *

Enter your current designation (Max 25 characters).

Bps *

Enter name current BPS (1 to 16) (Max 2 characters/ digits).

PERSONAL DETAILS

Applicant Name *

Enter your name.(Max 30 characters).

CNIC *

Enter your CNIC in the format (xxxxx-xxxxxxx-x) (Max 15 characters).

Date of Birth *

Gender *

Required Qualification *

Enter your current qualification (Max 15 characters).

Residential Address

Enter your home address (Max 50 characters).

Phone no

Enter your landline number, if any (Max 15 characters).

Mobile

Enter your mobile number (Max 24 characters).

email *

Enter your email address (Max 50 characters).