BAHRIA UNIVERSITY - EMPLOYMENT FORM

(Pa ss po rt Si ze Photograph Paste He re)

Cyber Reconnaissance and Combat (CRC) Lab

JOB APPLIED FOR THE POST OF:

Please fill online application for the post at <https://forms.office.com/Pages/ResponsePage.aspx?id=bAnfdXKL5Eibkcv3nYfuOhf4sF7txCdPs_tSPnwl2FhUNEdRVlBRVkJFQ1JIOElSMDA0TTVQQ1VOVC4u> (Mandatory)

**1.** **PERSONAL INFORMATION**

NAME: \_\_Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_Gender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CNIC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Marital Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tele/ Cell No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2**. **QUALIFICATION**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Certificate/Degree | Duration in Years | Specification | Degree Completion Date | CGPA%AGE/Grade | Institute/Board/University | Country |
| SSC |  |  |  |  |  |  |
| HSSC |  |  |  |  |  |  |
| Bachelors |  |  |  |  |  |  |
| Masters |  |  |  |  |  |  |
| MS/M.Phil |  |  |  |  |  |  |
| Ph.D |  |  |  |  |  |  |
| Final Year Project (Title): |
| MS Thesis Title: |

i. Total Qualification (in years) \_\_\_\_\_\_\_\_\_\_\_\_\_ ii. No. of Publications (if any) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **3. Experience (only mentioned Jobs for which experience certificates can be furnished)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Institution/Organization** | **Position/Job Title** | **Period** | **Total Period (in Years)** |
| **From** | **To** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

I have submitted CRC Job application form on “google forms” submitted Yes No

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_