**FEDERAL JUDICIAL ACADEMY**



**ISLAMABAD**

Photograph

(Passport size)

**APPLICATION FORM FOR THE POST OF DIRECTOR GENERAL (B-22)**

|  |  |  |
| --- | --- | --- |
| 1. | Registration No. *(for official use only)* |  |

**Personal Profile**

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| --- | --- | --- | --- | --- | --- |
| 1. | Name |  | | | |
| 2. | Father’s Name |  | | | |
| 3. | C.N.I.C # |  | 4. | Nationality |  |
| 5. | Date of Birth |  | 6. | Age  (on closing date) | Y(s) M(s) D(s) |
| 7. | Province of Domicile |  | 8. | District of Domicile |  |
| 9. | Religion |  | 10. | Gender |  |
| 11. | Highest Academic Qualification |  | | | |
| 12. | Present Designation (if any) |  | 13. | Place of Posting |  |
| 14. | Department |  | | | |
| 15. | Mobile No. |  | 16. | Emergency No. |  |
| 17. | Email Address |  | | | |
| 18. | Mailing Address |  | | | |
|  | | | |
| 19. | Permanent Address |  | | | |
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**Educational Qualifications**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Degree/Certificate | Division/Grade | Core Subjects | Name of Institution | Year |
| Matric |  |  |  |  |
| Fsc/FA |  |  |  |  |
| Graduation |  |  |  |  |
| Master’s Degree |  |  |  |  |
| LLM / M.Phil / MS |  |  |  |  |
| PhD |  |  |  |  |
| Others (if any) |  |  |  |  |

**Professional Profile**

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| --- | --- | --- | --- | --- |
| Sr. | Job Title | Employer | Duration | Job Description |
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**Local/National Trainings**

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| Sr. | Title of Certificate | Institution | Duration | Core Subjects |
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**Foreign Trainings**

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| --- | --- | --- | --- | --- |
| Sr. | Title of Certificate | Institution | Duration | Core Subjects |
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**Research Works / Publications**

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| --- | --- | --- | --- | --- |
| Sr. | Title | Institute | Year | Publication Status/ publisher |
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**Achievements/Awards**

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| --- | --- | --- | --- |
| Sr. | Title | Description | Date |
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**Skills**

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| --- | --- | --- | --- | --- |
| Sr. | Skill | Skill Level | Last Used | Year of Experience |
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**References**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sr. | Name | Designation | Department | Phone/Cell Number | Email | Type (Personal/ Professional) |
|  |  |  |  |  |  |  |
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**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_