SINDH PUBLIC SERVICE COMMISSION

APPLICATION FORM FOR DEPARTMENTAL EXAMINATIONS FOR PRISON DEPARTMENT

SUPERINTENDENT JAIL-(BPS-18)

THREE ATTESTED PHOTOGRAPH

1	Name with Father's Name of the Candidate	
2	Designation (Attached copy of Appointment order)	
3	i) CNIC NO.	| | | | | - | | | | | | | | - | |
	ii) Address / Contact NO.	
4	Whether Temporary or Permanent	
5	i) Length of Continue Service after graduation ii) He/She has Completed 12 Months Service	
6	Certificate from the Head of the Department to the effect that candidate performed duties Satisfactory and is qualified in merits Character and knowledge for the examination.	
7	Number of attempt along with Roll No. already made with the month and year of the examination in which appeared in the real in each case.	
8	Remarks.	

CONTER SIGNATURE AND STAMP
OF COMPITENT AUTHORITY

SIGNATURE OF
APPLICANT/CANDIDATE

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SINDH PUBLIC SERVICE COMMISSION

APPLICATION FORM FOR DEPARTMENTAL EXAMINATIONS FOR PRISON DEPARTMENT

DEPUTY SUPERINTENDENT JAIL-(BPS-17)

THREE ATTESTED PHOTOGRAPH

1	Name with Father's Name of the Candidate	
2	Designation (Attached copy of Appointment order)	
3	i) CNIC NO.	- -
	ii) Address / Contact NO.	
4	Whether Temporary or Permanent	
5	i) Length of Continue Service after graduation ii) He/She has Completed 12 Months Service	
6	Certificate from the Head of the Department to the effect that candidate performed duties Satisfactory and is qualified in merits Character and knowledge for the examination.	
7	Number of attempt along with Roll No. already made with the month and year of the examination in which appeared in the real in each case.	
8	Remarks.	

CONTER SIGNATURE AND STAMP
OF COMPITENT AUTHORITY

SIGNATURE OF
APPLICANT/CANDIDATE

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SINDH PUBLIC SERVICE COMMISSION

APPLICATION FORM FOR DEPARTMENTAL EXAMINATIONS FOR PRISON DEPARTMENT

ASSISTANT SUPERINTENDENT JAIL-(BPS-16)

THREE ATTESTED PHOTOGRAPH

1	Name with Father's Name of the Candidate	
2	Designation (Attached copy of Appointment order)	
3	i) CNIC NO.	- -
	ii) Address / Contact NO.	
4	Whether Temporary or Permanent	
5	i) Length of Continue Service after graduation ii) He/She has Completed 12 Months Service	
6	Certificate from the Head of the Department to the effect that candidate performed duties Satisfactory and is qualified in merits Character and knowledge for the examination.	
7	Number of attempt along with Roll No. already made with the month and year of the examination in which appeared in the real in each case.	
8	Remarks.	

CONTER SIGNATURE AND STAMP OF COMPITENT AUTHORITY

SIGNATURE OF APPLICANT/CANDIDATE

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SINDH PUBLIC SERVICE COMMISSION

APPLICATION FORM FOR DEPARTMENTAL EXAMINATIONS FOR PRISON DEPARTMENT

ADMINISTRATIVE OFFICER JAIL-(BPS-16)

THREE ATTESTED PHOTOGRAPH

1	Name with Father's Name of the Candidate	
2	Designation (Attached copy of Appointment order)	
3	i) CNIC NO.	- -
	ii) Address / Contact NO.	
4	Whether Temporary or Permanent	
5	i) Length of Continue Service after graduation ii) He/She has Completed 12 Months Service	
6	Certificate from the Head of the Department to the effect that candidate performed duties Satisfactory and is qualified in merits Character and knowledge for the examination.	
7	Number of attempt along with Roll No. already made with the month and year of the examination in which appeared in the real in each case.	
8	Remarks.	

CONTER SIGNATURE AND STAMP OF COMPITENT AUTHORITY

SIGNATURE OF APPLICANT/CANDIDATE

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