National Insurance Company Limited

**Picture**

Please paste your **recent passport size color photograph**

Karachi

# APPLICATION FORM

**POST APPLIED FOR** :

**Personal Information: Use CAPITAL letters only (Mandatory).**

## Full Name:

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Father’s/Name:

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Email:

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| Applicant CNIC #: |  |  |  |  |  | - |  |  |  |  |  |  |  | - |  |

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| Date of Birth: |  |  |  |  |  |  | Age |  |  |  |  |  |  |

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| Religion: | Muslim |  | Non-Muslim |  | Marital Status | Yes |  | No |  |

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**Phone/Mobile No:**

**Address:**

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**Academic Information**: **(Attach attested copies of your academic and other certificates/documents).**

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| --- | --- | --- | --- | --- | --- |
| **Certificate Degree Level** | **Degree Title** | **Specialization/ Major Subject** | **Passing Year** | | **Board/University/ Institute** |
| **From** | **To** |
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**Professional Qualification**: **(Attach attested copies).**

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| --- | --- | --- | --- | --- | --- | --- |
| **Certificate/Degree** | **Marks Obtained** | **Total Marks** | **Grade/ Division** | **Year** | | **Board/University/ Institute** |
| **From** | **To** |
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**Employment Record**: **(Attach attested copies).**

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| --- | --- | --- | --- | --- | --- |
| **Sr.#** | **Organization/Employer Name** | **Job Title** | **Job Duration** | | **Specified in year(s)** |
| **From** | **To** |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |

**Days Months Years**

Total Job relevant Post Qualification Experience as on closing date of application:

**Skill (optional)**: **(Attach certificate copies).**

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| --- | --- | --- |
| **Sr.#** | **Description** | **Proficiency Level (Beginner/intermediate/Advance)** |
|
| 1. |  |  |
| 2. |  |  |

**Training (optional)**: **(Attach certificate copies).**

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| **Sr.#** | **Description** | **Duration** | |
| **From** | **To** |
| 1. |  |  |  |
| 2. |  |  |  |

**Language (optional)**: **(Attach certificate copies).**

|  |  |  |
| --- | --- | --- |
| **Sr.#** | **Description** | **Proficiency Level (Beginner/intermediate/Advance)** |
| 1. |  |  |
| 2. |  |  |

# Undertaking By the Applicant:

I d/s/w of do hereby solemnly declare and affirm that I have filled-up the application form as per instructions given below. In case of any information contained herein is found at any stage be untrue, false, my candidature can be cancelled at any stage (even after employment, if so revealed later), and I shall be liable to legal action.

Date : Applicant’s Signature

**GENERAL INSTRUCTION/INFORMATION**:

* Please fill in the Application Form properly with complete and correct information/answers.
* Please do not leave any relevant field blank, otherwise your application will not be considered.
* Incorrect or false information may result in cancellation of your candidature at any stage, even after employment, and also proceeding of a legal action.
* Attach your recent Passport Size Photograph.
* Attach a copy of Valid CNIC.
* Attach an updated CV.
* Attach copies of all documents related to academic and professional qualification.
* The application form (available on the NICL website at www.nicl.com.pk/careers/) addressed to General Manager (HR), 3rd Floor, NIC Building, Abbasi Shaheed Road, Karachi. Must reach within 15 days of the publication of this Advertisement. Or interested candidates may apply online by sending an email (titled as Hiring of Chief Medical Officer, Karachi/Islamabad) at [careers@nicl.com.pk](mailto:careers@nicl.com.pk), and filled application form alongwith all relevant documents must be attached with email. O**r** may apply through the National Job Portal website at <http://www.njp.gov.pk> within 15 days of the advertisement publication. Applications received by hand will not be considered.

## Candidate’s Signature: \_