

Photo

**NSDO- JOB APPLICATION FORM**

Job applied for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **Full Name:** |
| **Father’s Name:** |
| **Nationality:** |
| **Date of Birth:** |
| **Marital Status:**  Married Single Widowed Separated |
| **Gender:** Male Female |
| **National ID#:** |
| **Contact Info;**  Email:  Phone: |

|  |  |  |  |
| --- | --- | --- | --- |
| **Address** | **Village** | **District** | **Province** |
| Place of Birth |  |  |  |
| Present Address |  |  |  |
| Permanent Address |  |  |  |

|  |
| --- |
| **Native language:** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Languages:** | **Understanding** | | | **Speaking** | | | **Reading** | | | **Writing** | | |
| Fair | Good | Excellent | Fair | Good | Excellent | Fair | Good | Excellent | Fair | Good | Excellent |
| Dari |  |  |  |  |  |  |  |  |  |  |  |  |
| Pashto |  |  |  |  |  |  |  |  |  |  |  |  |
| English |  |  |  |  |  |  |  |  |  |  |  |  |
| Other |  |  |  |  |  |  |  |  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **Education: For more details kindly attach your CV** | | | | | | |
| **Grad/Degree/ Certificate** | **School/College/University** | **Location** | **Duration** | | **Completed** | |
| **From** | **To** | **Yes** | **No** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **Computer knowledge: Which software are you able to use?** | | | | | | |
| **Software programs** | | **Expert** | | **Can Operate** | | |
|  | |  | |  | | |
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| --- | --- | --- | --- | --- | --- | --- |
| **Trainings obtained** | | | | | | |
| **Subject** | **Facility provider** | **Location** | **Duration** | | **Certificate** | |
| **From** | **To** | **Yes** | **No** |
|  |  |  |  |  |  |  |
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| --- | --- |
| **Driving:** Yes No | **License:** Pakistani Afghani |

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| --- | --- | --- | --- | --- | --- |
| **Employment Record** | | | | | |
| **Duration** | | **Employer** | **Position/Title** | **Location** | **Salary** |
| From | To | ↓ | ↓ | ↓ | ↓ |
|  |  |  |  |  |  |
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| --- | --- | --- | --- | --- |
| **Write down your relative(s) information employed by ABCD** | | | | |
| **S/N** | **Name** | **Phone Number** | **Relationship** | **Designation** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **List three persons (not your relatives) as professional and character reference** | | | |
| **S/N** | **Name** | **Telephone #** | **Occupation** |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |

|  |  |  |
| --- | --- | --- |
| Do you suffer from any physical or mental illness that requires treatment or which will impact on your ability to work? | Yes | No |

If yes, please specify………………………………………………………………………………………

Have you previously been interviewed by NSDO for any position? If yes,

|  |  |  |
| --- | --- | --- |
| **Date** | **By whom** | **Position** |
|  |  |  |

I certify that the facts set forth in this application are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This organization is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is “at will,” which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this organization, other than the president, has any authority to alter the foregoing.

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_