Application No. _____
(To be filled by Office)

STATE LIFE
INSURANCE CORPORATION OF PAKISTAN

Attached 2 Passport Size Pictures

APPLICATION FORM

Career Opportunity

Position Applied for:	**CHIEF TECHNOLOGY OFFICER (C.T.O.)**

1. Name: _____

2. Father's Name: _____

3. CNIC #: _____ - _____ - _____

4. Date of Birth : __ __ - __ __ - __ __ __ __

5. Gender ☐ **Male** ☐ **Female**

6. Domicile : ☐ **Punjab** ☐ **Sindh (U)** ☐ **Sindh (R)** ☐ **KPK** ☐ **GB/FATA** ☐ **Balochistan**

7. District of Domicile: _____

8. Contact No.: _____ - _____

8. Email ID : _____

9. Landline No.: _____

9. Postal Address: _____

_____

10. Academic Qualification:

Certificate / Degree Level	Degree Title	Major Subject	Year Passing	Percentage/ Grade	Board/University
Matric (10 Years)					
Intermediate (12 Years)					
Bachelor (14 Years)					
Bachelor(Hons) / Master (16 Years)					
MS					
Others					

(Degrees must be acquired from HEC recognized Universities)

11. Professional Qualification (if any)**:**

Certificate / Degree Level	Degree Title	Major Subject	Year Passing	Percentage/ Grade	Board/University

12. Current Experience Detail:

S. No.	Organization/Employer Name	Position (Working as)	Specialized Field	Job Duration Write only Month & Year	
				From	To
i.					

13. Previous Experience Detail:

S. No.	Organization/Employer Name	Position (Working as)	Specialized Field	Job Duration Write only Month & Year	
				From	To
i.					
ii.					
iii.					
iv.					
v.					

	Days		Months		Years
Total Job Experience as on closing date of application:		-		-	

(If more experience or qualification to mention, kindly attach another page & sign)

14. Desired Interview Center

☐ **Karachi**	☐ **Lahore***	☐ **Islamabad***			

(* is subject to number of candidates, otherwise will be interviewed at Karachi)

15. Undertaking By The Applicant:

I _____ S/o _____ hereby certify that the information provided by me in this Form is true, complete and correct to the best of my knowledge and belief. I understand that any misrepresentation omission made on Application Form or other document(s) requested by SLIC may result in cancellation of this and future application in SLIC.

Date: _____ **Signature of the Candidate**_____

Note:

i. Partially filled forms will be rejected.
ii. Please send duly filled Application Forms alongwith photocopies of all educational and experience certificates.
iii. Clearly indicate Job Title (post name) on right corner of the envelope.
iv. Send application through registered post to **"Divisional Head (P&GS), 2nd Floor, State Life Building No.9, Dr. Ziauddin Ahmed Road, Karachi".**