# HIGH COURT OF AZAD JAMMU & KASHMIR MUZAFFARABAD

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## **JOB APPLICATION FORM**

FOR THE VACANT POST OF STENOGRAPHER BS-16
IN JUDICIAL DEPARTMENT (LOWER COURTS ESTABLISHMENT)

(under AJ&K Judicial Department (Lower Courts Establishment) Rules, 2016

Paste Passport Size photograph (Do not staple)

#### PERSONAL INFORMATION

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Full Name of Candidate:										(	(In En	glish)	)
Take Harrie of Junulaute.											(	(اُردوميس)	)
Father's/ Husband's Name:										(	(In En	glish)	)
											(	(اُردوميس)	)
Gender:		l	Male				Fe	mal	е				
Date of Birth:						-	-						
<b>Age on</b> 15.12.2021:			,	Y			М					D	
CNIC No.:				-	-						-		
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State Subject:													
Marital Status:			Single				М	arrie	ed				
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Permanent Address:													
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Contact No.:													
Whatsapp No.:													
Email Address:													

### **ACADEMIC QUALIFICATION**

Title of Dograd	Passing	M	larks	Division/	Board/ University		
Title of Degree	Year	Total Obtaine		Grade/ CGPA	Board/ Offiversity		
Matric/ SSC							
Intermediate/ HSSC							
Bachelors (14 Years)							
Masters (16 Years)							

	<u>J</u> (	OB REL	ATED (	OURSE	-		<u>AS</u>				
Title of Certificate/ Diploma			Year	Mark Total	rks (if any) Obtained		Institute				
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Are you Govt. En	nployee			es, attach	NOC/ Dep		— ntal Per	mission	Certific	ate (DPC	
				copy of Ap	pointment	Notific	cation/ U	rder)			
Designation	Scale	I .	ermanen oorary/ A	- 1	Period		Department/Institution				
			,,								
JNDERTAKING:	(For all crede	ntials, docu	ments, cert	ificates, exp	erience, and	d inforn	nation giv	en in/witl	h applica	tion form)	
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## NOTE:

- All documents should be duly attested.
  Incomplete applications will not be entertained.

**DEPARTMENTAL PERMISSION CERTIFICATE (DPC)** 

To be submitted by the candidates who are in Govt./Semi Govt. Service with the APPLICATION FORM duly completed failing which the application shall be liable to rejection.

The following particulars should be filled in by the candidate:-

1.

	Full	Name of Candidate:							
	Fath	er's/ Husband's Name:							
	Pos	t Held (Presently)							
	Offic	ce/ Department							
	Pos	t Applied for:							
			Signature of the Candidate/ Applicant						
2.	This p	portion should be filled in	completely by the concerned Department/ Office:						
	(a)	He/ She has been emplo	yed in this Department/ Office as						
		Since							
	(b)	He/ She holds this post in Permanent / Temporary, Adhoc capacity o							
	(c)		e as accepted by this Department/ Office and dis District.						
	(d)	ineligible for the post and	cord of this Department which may render him d that his/her record of service is satisfactory and dings are pending against the candidate.						
			Signature and Official Stamp of Head of Department / Appointing Authority						
Note: □	meant	to be filled in by the Departme	ermission should please ensure that all the blank spaces nt are accurately filled in. e is selected / nominated by the Competent Authority, the						

the post for which he/she has been recommended.

parent Department of that candidate shall be bound to relieve him/her to enable him/her to join