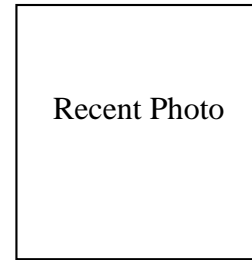


EDB INTERNSHIP APPLICATION

FORM

(FILL THE FOLLOWING IN BLOCK LETTERS)



Applicants Name: _____

Father's/Name: _____

Postal Address: _____

Permanent Address: _____

City: _____ Country: _____ D.O.B _____

Gender: _____ Email: _____ Telephone: _____

Mobile: _____ CNIC: _____ Domicile: _____

ACADEMIC QUALIFICATION

Qualification	Major	Institution	Year

ACHIEVEMENTS / DIPLOMAS / COURSES/CERTIFICATES

Major	Institution	Year	Duration

RELEVANT EXPERIENCE SUMMARY

Organization	Location	Designation	Duration (in years)

LAST INTERNSHIP PARTICULARS

Organization: _____

Location: _____

Designation: _____

Duration: _____

Nature of Job: _____

Reason for quitting/ resigning: _____

I hereby declare that all information given in this application is true to the best of my knowledge, if above information is found to be false; I am bound to obey the decision of selection committee.

Applicant's Signature

The candidate should attach the following with the application.

1. Recent Passport size photo to be attached on the application (if pic available)
2. Copy of CV
3. Copy of degrees/diplomas/certificate and any other document that will support your application
4. Copy of resignation letter and experience letter from previous job (if applicable).