**NATIONAL INSTITUTE OF MANAGEMENT QUETTA**

**MID CAREER MANAGEMENT COURSE**

**FORM “A”**

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| **PARTICIPANTS’ BIO DATA FORM** |
| **Important Notes**: | **Passport Size****1 ½ X 1 ½** |
| * To be copied and filled in duplicate.
 |
| * No column to be left blank. Please give reason in case it is being left blank.
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| * Form should be typed or filled in ***LEGIBLE HAND WRITING***.
 |
| * Please staple two copies of your recent passport size photographs with white background.
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|  | **Name:****(In Block Letter)** |  |
|  | **Present Grade or Equivalent:** |  | 1. **Date of appointment to present designation:**
 |  |
|  | **Present Designation:** |  |
|  | **Occupational Group/ Cadre:** |  |
|  | **Father’s Name:** |  |
|  | **Domicile (Province/ District)** | **Province \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  | **Addresses:** | **Official**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Home Present**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Home Permanent (*If different*)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | **Addresses with Cell Nos. in Emergency** |  |

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|  | **Contact Information**: | **Office**: ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Fax**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Res**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Cell**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Email**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | **Date of Birth**: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Place of Birth**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**(City & Province)** |
|  | **C.N.I.C.No.** |

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|  | **Marital Status**: | **Married / Unmarried / Widowed / Divorced *(Encircle/Tick the relevant one)*** |
|  | **Children**: | **Son(s)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Daughter** **(s)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Total** \_\_\_\_\_\_\_\_\_\_ |
|  | **Date of Joining Service in BS-17**: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Day | - | Month | - | Year |
|  |  | - |  |  | - |  |  |  |  |

 | 1. **CTP No:** \_\_\_\_\_\_ Year \_\_\_\_\_\_\_\_\_

 **STP No:** \_\_\_\_\_\_\_Year\_\_\_\_\_\_\_\_\_ |
|  | **Positions held since promotion to BS-18 or equivalent, in Government or other organizations, showing dates and duration of each assignment held:** |
| Grade or Equivalent | Assignment/Designation | Ministry Division /Department / Org. | From | To | **Duration****(month/year)** |
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| **(Add separate page if required)** |
|  | Present basic pay: | **RS**. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Date of promotion in BS-18: |

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| --- | --- | --- | --- | --- |
| Day | - | Month | - | Year |
|  |  | - |  |  | - |  |  |  |  |

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|  | Brief description of responsibilities of present post: |  |
|  | **Educational qualifications (Post Graduate, Graduate and Diploma) with disciplines and years starting with highest qualification)** |
| Diploma /Degree | Subject | Institution | Year |
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| **(Add separate page if required)** |
|  | **Training Received:** |
|  | Name of Course | Duration**(weeks/months)** | **Dates** | **Name of Institution** |
| **From** | **To** |
| 1. **In Pakistan**
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| **(Add separate page if required)** |
| 1. **From Abroad (write name of Country also in last Column)**
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|  | Area of Specialization: |  |
|  |  Additional technical or professional qualifications, if any: |  |
|  | **Published/unpublished work:***(Books, articles, reports)* |  |
|  | **Membership of official and unofficial committees / commissions:** |  |
|  | **Membership of academic/ literary / professional associations:** |  |
|  | **Name of the nominating government department / organization:** |  |
|  | **Name and designation of the authority which maintains the PER of the nominee and to whom the report of the nominee to be sent:** |  |
|  | **Height** (Feet/inches)**Weight** (Kgs) | **Height** | **Weight** |
| **Feet\_\_\_\_\_\_\_\_ Inches\_\_\_\_\_\_\_\_** | **Kg.\_\_\_\_\_\_\_\_\_\_\_** |
|  | **Preference of Sports \*** | **Choice-1** | **Choice -2** | **Choice-3** |
|  |  |  |
|  | **Health Concerns:** |  |  |  |
| **Diabetes, Cardiac, Ulcer, Hepatic, BP, Vertigo, Lumbago** |

**(\*) Badminton, Lawn Tennis, Table Tennis, Volley ball, Pool/Snooker, Golf, Squash, Chess, Walking / Jogging, etc.**

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**