

Job Application Form for Faculty Positions

COMSATS Institute of Information Technology



Islamabad

Lahore

Abbottabad

Wah

Attock

Sahiwal

Vehari

Name of Applicant _____

Post Applied for _____

Department _____

Note: Please mark/fill information as applicable

(II) Academic Background, Professional Training & Extra/ Co-curricular Activities

(a) Academic Background (Please start from highest qualification and go in descending order)

Degree/ Certificate held	Field/ Subject	Session		Year of Award	University/ Institute/ Board		Marks Detail		Grade/ Division/ CGPA
		FROM	TO		Institution Name	Country	Obtained	Total	

(copy of degrees/certificates may also be attached)

(b) Professional Training (Please start from most recent training and go in descending order)

Course	Diploma/Certificate	Field of study	Institution	Grade

(copy of certificates may also be attached)

(c) Extra/Co-curricular Activities/Hobbies/Interests (if any)

(III) **Employment History** (Please start from your recent job and go in descending order)

(a) **Teaching** (Please do not write down experience as visiting faculty)

Name of Organization	Designation	Scale	Job Profile	Duration Time		
				Dates		Period
				From	To	YY-MM-DD
					__-__-__	
					__-__-__	
					__-__-__	
					__-__-__	
Total				__ YY, __ MM, __ DD		

(b) **Industrial** (if any)

Name of Organization	Designation	Scale	Job Profile	Duration Time		
				Dates		Period
				From	To	YY-MM-DD
					__-__-__	
					__-__-__	
					__-__-__	
					__-__-__	
Total				__ YY, __ MM, __ DD		

Total Experience [Teaching(a) & Industrial(b)]	Years	Months	Days

(experience certificates may also be attached)

(IV) Research Publications

(Must include name of journal; year/volume of publication; page numbers; author(s); title)

(a) National/ International Journal Papers

Sr. #	Title of Publication	Complete Name of Journal and Address	Vol. No.	Page No.	Year	HEC approved (Yes/ No)	Impact Factor
1.							
2.							
3.							
4.							

(b) National/ International Conference Papers

Sr. #	Title of Publication	Conference	Year	Venue
1.				
2.				
3.				
4.				

(c) Book/ Book Chapter Written (if any)

Sr. #	Title	Subject/ Description	Publisher (if any)
1.			
2.			
3.			

(d) Lab Manual (if any)

Sr. #	Title/ Topic	Subject/ Description	Publisher (if any)
1.			
2.			

(V) Reference:- Provide Two Academic/Professional References

Reference No: 1. Name _____ Position _____
Address _____
_____ Phone No _____
Email _____

Reference No: 2. Name _____ Position _____
Address _____
_____ Phone No _____
Email _____

By signing below and submitting this application form I, -----, confirm that the information I have provided is accurate to the best of my knowledge and that I authorize you to contact the references provided above for further information.

Date _____

Signature of the Applicant

DOCUMENTS REQUIRED

Attach followings with the form and indicate by a tick (✓) in the relevant box.

- Official, certified photocopies of all academic degrees and transcripts.
- Experience Certificates for the work experience mentioned in the application form.
- Photocopy of CNIC.
- Photocopy of domicile.
- Most Recent Photographs (3).

FOR OFFICE USE

Application Received by: _____ Date _____

Checked by: _____ Date _____

Short Listed Not Short Listed if not, reason(s) _____

Signature & Name of Dealing Officer _____

Date _____