

**SERVICE PARTICULARS OF PASSCO EMPLOYEE**

1. PT. No. \_\_\_\_\_
  2. Name \_\_\_\_\_
  3. Father's Name \_\_\_\_\_
  4. Date of Birth \_\_\_\_\_  
(may be treated as **final/unchangeable**, if not requested within **02 years** of the date of my joining PASSCO Service.)
  5. Domicile District/Province \_\_\_\_\_
  6. CNIC No. \_\_\_\_\_
  7. Mobile No. \_\_\_\_\_
  8. Religion \_\_\_\_\_
  9. Designation \_\_\_\_\_
  10. Qualification \_\_\_\_\_
  11. Marital Status \_\_\_\_\_
  12. Date of Joining with Authority \_\_\_\_\_
  13. Home Address with District \_\_\_\_\_  
\_\_\_\_\_
  14. Present Address \_\_\_\_\_  
\_\_\_\_\_
- Signature \_\_\_\_\_

**COUNTERSIGNED**