NATIONAL POLICE ACADEMY

SECTOR H-11, ISLAMABAD

**Employee Personal Data Form**

|  |  |  |  |
| --- | --- | --- | --- |
| **Employee ID** |  |  |  |

|  |  |  |
| --- | --- | --- |
| 1. | Name |  |
| 2. | Father’s/Spouse Name |  |
| 3. | Post/Rank |  | 4. | BPS |  |  |
| 5. | Gender | Male | Female | Transgender | 6. | Blood Group |  |
| 7. | CNIC No. |  |  |  |  |  | - |  |  |  |  |  |  |  | - |  |
| 8. | Date of birth |  |  | - |  |  | - |  |  |  |  | 9. | Place of birth |  |
| 10. | Religion | Muslim | Qadyani | Hindu | Sikh | Christian | If others pl. specify |  |
| 11. | Qualification with core subjects | Ph.D | M. Phil/MS | Master/BS | Bachelor | HSSC/A-Level |
|  | SSC/O-Level | Middle | Primary | Illiterate | Other (Specify) |
| 12. | Temporary Address |  |
| 13. | Permanent Address |  |
| 14. | Domicile with district |  |
| 15. | Nearest Police Station |  | 16. | Landline Phone |  |
| 17. | Landline Phone |  | 18. | Cellular Phone |  |
| 19. | Parent Department |   |
| 20. | Nationality | Single (Pakistani) | In case other/dual, name of other country |  |
| 21. | Marital Status | Single | Married | Separated | Divorced | Widower/Widow |
| 22. | Name of Spouse |  |
| 23. | Nationality of Spouse | Single (Pakistani) | In case dual name of country |  |
| 24. | CNIC of Spouse |  |  |  |  |  | - |  |  |  |  |  |  |  | - |  |
| 25. | Professional Courses | S # Name of Institute Duration1)2)3) |
| 26. | Computer Courses | S # Name of Institute Duration1)2)3) |
| 27. | Other courses if any | S # Name of Institute Duration1)2)3) |
| 28. | Experience | S # Name of organization served Duration1)2)3) |
| 29. | Names of dependent family members (Enclose attested copies of CNIC and B Form) | S # Name Age Relationship Gender Profession Class1)2)3)4)5)6) |
| 30. | Name & CNIC No. of nominee for pension purpose in case of death |  |
| 31. | Additional expertise, if any | 1)2)3) |
| 32. | Hobbies | 1) 2) 3) |
| 33. | Date of entry into government service |  | 34. | Date of retirement on completion of 25 years’ service |  |
| 35. | Date of entry into NPA service |  | 36. | Date of retirement on attaining the age of superannuation |  |
| 37. | Date of appointment on current position/rank | Position |  | Rank |  |
| 38. | Do you have? | Motorcycle | Car/Jeep | Others (Pls. specify): | None |
| 39. | Do you own? | Plot | House | Flat | Agriculture Land | None |
| 40. | Bank Account # |  |
| 41. | Name of Bank & address |  |

**Signatures: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**Note:**

1. **Please tick (🗹) in front of relevant box.**
2. **Overwriting & use of fluid is not allowed.**
3. **Enclose copies of CNIC/Form B of self & dependent family members.**
4. **Attach 04 recent photographers.**
5. **Enclose attested copies of all credentials.**
6. **Please enclose detailed CV.**