



# QUETTA ELECTRIC SUPPLY COMPANY

## Examination Cell Regional Training Center

Serial No. \_\_\_\_\_

Roll No. \_\_\_\_\_

### APPLICATION FROM FOR THE DEPARTMENTAL PROMOTION EXAMINATION

From \_\_\_\_\_ to \_\_\_\_\_

1. Name of the candidate \_\_\_\_\_
2. Father's Name \_\_\_\_\_
3. Postal Address where working \_\_\_\_\_
4. Telephone No./Mobile \_\_\_\_\_
5. Qualification \_\_\_\_\_
6. Date of Birth \_\_\_\_\_ Date Appt. \_\_\_\_\_
7. Date/Length of service in present post \_\_\_\_\_
8. Training course attend \_\_\_\_\_
9. If appeared in examination previously (Give detail)
  - a. Roll No. \_\_\_\_\_ Date \_\_\_\_\_
  - b. Roll No. \_\_\_\_\_ Date \_\_\_\_\_
  - c. Roll No. \_\_\_\_\_ Date \_\_\_\_\_

- Certified that the information given above is correct
- I am fully aware that wrong information given by me will be liable for strict disciplinary action under the rule

**Signature of Candidate**

QUETTA ELECTRIC SUPPLY COMPANY	
Roll No Slip	
Roll No.	_____
Name	_____
Designation	_____
Address	_____
Telephone/Mobile No.	_____
Note:- Please fill all columns except Roll No.)	
Asstt: Controller Examination RTC QESCO Quetta	

- Candidate without Roll No. Slip cannot appear in the examination
- Please bring your original I.D card with yourself
- Any form of cheating with be liable to stem action under relevant Rules



## **CERTIFICATE OF HEAD OF DEPARTMENT**

Certificate that Mr. \_\_\_\_\_ S/o \_\_\_\_\_  
working as \_\_\_\_\_ eligible to appear for the  
department promotion examination from \_\_\_\_\_ to \_\_\_\_\_  
in accordance with instructions laid down in the SOP.

**Signature of the Controlling officer**

**Note:-**

1. Head of department will ensure that only eligible candidate may apply.
2. Contract employees are not eligible.
3. The candidate should keep photo copy of this form duly filled, in case of non-receipt of Roll No. slip please contact to these telephone Nos. of RTC
  1. 081-9202482
  2. 081-9202080
  3. Fax No.081-9202482