

REGISTRATION FORM

Reg. No. _____
To be Filled by NTS

AZAD JAMMU & KASHMIR COUNCIL

Screening Test for the Post of
Judicial Member BS-20

Picture 1

Paste your recent
passport size color
photograph **with gum**

تصویر لازماً منسلک کریں بصورت
دیگر فارم عمل میں نہیں لایا جائیگا۔

01. Bank Online Deposit of Rs: 2000/- from Designated Bank Branches.

Bank Code		Deposit Date	
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*Note: Application Form will not be entertained without Original Deposit Slip (NTS Copy)

02. Desired Test City: Fill Only One Box (Mandatory)

(Subject to a minimum of 200 candidates, otherwise the candidates will be assigned next nearest test city)

01. <input type="checkbox"/> Isb / Rwp	02. <input type="checkbox"/> Lahore	03. <input type="checkbox"/> Karachi	04. <input type="checkbox"/> Peshawar
05. <input type="checkbox"/> Quetta	06. <input type="checkbox"/> Muzaffarabad		

03. Type of Citizenship: Fill Only One Box for Desired Type of Citizenship. (Mandatory)

01. <input type="checkbox"/> State Subject	02. <input type="checkbox"/> Refugees
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Personal Information: Use CAPITAL letters and leave spaces between words.

04. Name in Full:

05. Father's Name:

06. Candidate CNIC #: - -

Write your own CNIC No. Or B Form No.

07. Gender: Male Female

08. Date of Birth:

Write your Correct Date of Birth
otherwise you will be rejected

D D - M M - Y Y
1 9

09. Postal Address: _____
All correspondence will be made on this address though courier service or ordinary postal service.

City: _____ District: _____

10. Permanent Address: _____

City: _____ District: _____

11. Phone No: (OFF) _____ (RES.) _____ (Mobile) _____
City Code - Phone No Mandatory

12. Email Address: _____

13. Are you a Government Servant and applying through proper channel?
In case of Yes, please attach NOC

Yes

No

14. Are you a Disabled Person?

If yes, please attach Disability Certificate

Yes

No

15. Religion: Muslim Non Muslim

If Non Muslim,
Please Specify: _____

16. Have you exercised law as District Judge? Yes No

17. Have you ever been an advocate of High Court? Yes No

18. Date and number of enrolment as an Advocate with Bar Council:

Date: - - Enrolment #: Name of Bar Council:

19. Membership # and date as a member of District / Tehsil Bar Association:

Date: - - Membership #: Name of Bar Association:

20. District of Domicile: Fill Only One Box (Mandatory)

01. <input type="checkbox"/> Muzaffarabad	02. <input type="checkbox"/> Neelum	03. <input type="checkbox"/> Sudhnutti	04. <input type="checkbox"/> Bhimber
05. <input type="checkbox"/> Poonch (Rawlakot)	06. <input type="checkbox"/> Mirpur	07. <input type="checkbox"/> Bagh	08. <input type="checkbox"/> Kotli
09. <input type="checkbox"/> Haveli	10. <input type="checkbox"/> Hattian Bala		

21. Academic Information: (Please attach copies of your academic certificates)

- Note: 1. NTS will not issue Roll No Slips to those who have not filled in their academic record properly.
2. Candidate should convert their grades into marks. (O Level / A Level or any other degree having grade).
3. Write exact degree name & major subject mention in certificate / transcript.
4. Result awaiting candidates are not eligible.

Certificate / Degree Level	Degree Title	Specialization / Major Subject	Year of Passing	Obtained Marks / CGPA	Total Marks / CGPA	Board / Institute / University
Matric (10 Years)						
Intermediate (12 Years)						
Bachelor (14 Years)						
LL.B / Equivalent						
LL.M / Equivalent						
M.A / M.Sc (16 Years)						
M.S / M.Phil (18 Years)						
Any Other						

22. Employment Record: (Please attach attested copies of your experience certificates.)

Sr #	Organization / Employer Name (Please write the most recent first)	Job Title	Job Duration Write only Month & Year	
			From	To
01				
02				
03				
04				
05				

23. Total Job Experience as on closing date of applications: Days - Months - Years

24(a). Whether any disciplinary proceedings are pending against you; if yes, give details

 Yes No

24(b). Have you ever been terminated / removed / dismissed from service; if yes, give details

 Yes No

24(c). Have you ever resigned from service; if yes, give details

 Yes No

25. Have you ever been previously dis-qualified / debarred from appearing in any examination by the Federal / Provincial, AJ&K Public Service Commission, if so give details.

 Yes No

26. Have you ever been prosecuted; if so, give detail and what was the result.

 Yes No

27. Are you a member of any political or religious party; if yes, give particulars.

 Yes No

Undertaking By The Applicant:

I _____ d/s/w of _____ do hereby solemnly declare and affirm that I have read and understood the instructions and conditions for appearing in the NTS Test, and I have filled-up the application form as per instructions given below. In case of any information contained herein is found at any stage to be missing, untrue, false or forged, my candidature can be cancelled at any stage (even after employment, if so revealed later), and I shall be liable to legal action.

Date: _____ Thumb Impression _____ Candidate's Signature _____

Picture 2

Affix your recent
passport size color
photograph
with Stapler

تصویر لازماً منسلک کریں بصورت
دیگر فارم عمل میں نہیں لایا جائیگا۔

General Instructions / Information:

- Please fill the Application Form properly with complete and correct information / answers.
- Please DO NOT leave any field blank, otherwise your application may not be considered.
- Incorrect, false or forged information may result in cancellation of your candidature at any stage, even after employment, and also proceeding of a legal action.
- Attach your Two recent Passport Size Photographs, Attested copies of CNIC / Domicile Certificate / Academic Certificate / State Subject Certificate and Original Bank Deposit Slip (NTS Copy)
- By Hand submission of Application Form is not allowed.
- Mobile Phones or any Electronic Gadgets are not allowed in Test Center premises.
- **Last date for submission of application form is Saturday 14th May, 2016.**
- Application should reach NTS office latest by last date of submission of Application Form.
- NTS will not be responsible for late receiving of application through courier / Pakistan Post etc.

HELP LINE:

UAN : +92-51-844-444-1
Website : www.nts.org.pk

Please Send Application Forms to:

National Testing Service
AJK Council (Project)
1-E, Street No. 46, Sector I-8/2,
Islamabad.

EXPERIENCE CERTIFICATE

Only this certificate will be accepted. No other certificate allowed

Reference No. _____

Date: ____ / ____ / 2016

Certified as under:

I) That Mr / Miss / Mrs / Ms _____ son / daughter / wife of _____ is a Bonafide Member of District / Tehsil Bar Association since _____.

II) He / She is registered as a Member of this Bar Association since _____ with registration No. _____.

III) He / She is whole time practicing advocate.

IV) He / She, according to the record of the Bar and to the best of my knowledge bears good moral character.

Name of President

**Signature of President
with Official Stamp**

To be countersigned by the Registrar High Court or District & Sessions Judge

**Name of
Registrar High Court or D&SJ**

**Signature of Registrar High Court D&SJ
with Official Stamp**

DEPARTMENTAL PERMISSION CERTIFICATE

Only this certificate will be accepted. No other certificate allowed

Reference No. _____

Date: ____ / ____ / 2016

Certified as under:

I) That Mr / Miss / Mrs / Ms _____ son / daughter / wife of _____ is serving as _____ in this department and he is permitted to appear in the competitive examination for the post of Judicial Member (BS-20)-ATR

II) That the said officer / official, according to the record carries good working background and that no disciplinary proceedings are pending against him / her.

Name of Issuing Authority

Signature with Official Stamp
with name of department

Check List

Tick "YES" or "NO" against the certificates and other documents which you have attached with this application:

A) Copy of CNIC	<input type="checkbox"/> Yes <input type="checkbox"/> No
B) Latest five (5) photographs (Front) with blue background (size: 1 ½ x 1 ½ inches)	<input type="checkbox"/> Yes <input type="checkbox"/> No
C) Matriculation / Equivalent Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No
D) Intermediate / Equivalent Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No
E) Graduation / Equivalent Degree	<input type="checkbox"/> Yes <input type="checkbox"/> No
F) LL.B / Equivalent Degree	<input type="checkbox"/> Yes <input type="checkbox"/> No
G) LL.M / Equivalent Degree	<input type="checkbox"/> Yes <input type="checkbox"/> No
H) Master / Equivalent Degree	<input type="checkbox"/> Yes <input type="checkbox"/> No
I) Experience certificate active practice as an Advocate duly certified by the President District / Tehsil Bar Association showing No. and date of registration as a Member of the said Bar and duly countersigned by the Registrar High Court or District and Sessions Judge.	<input type="checkbox"/> Yes <input type="checkbox"/> No
J) Certificate of Enrolment as an Advocate of District Courts	<input type="checkbox"/> Yes <input type="checkbox"/> No
K) Certificate of Enrolment as an Advocate of High Court (<i>if applicable</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No
L) State Subject Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No
M) Did you attached online bank deposit slip	<input type="checkbox"/> Yes <input type="checkbox"/> No

Instructions:

1. All entries in the form must be made in Block Letters by the Candidate Mandatory typed.
2. Incomplete applications and those without documents will be rejected summarily.
3. Each part/column of the application is to be filled, if any part/column is not applicable, write "N/A against it.
4. Applications not received on or before the closing date shall be treated as incomplete and rejected.
5. All the documents accompanying the application must be attested by an officer at least in Grade-17.
6. Forms with Cutting and overwriting will be rejected.
7. Any concealment of facts will lead to rejection of application form and judicial proceedings as well.
8. Relaxation in any kind of age, experience will not be granted in any case.



National Testing Service-Pakistan

Building Standards in Educational and Professional Testing

NTS COPY





AZAD JAMMU & KASHMIR COUNCIL

Branch Code: _____ Date: _____

Branch Name: _____

ONLINE DEPOSIT SLIP

(* Please deposit fee in only one bank & tick the relevant bank)

 Allied Bank Limited <small>(Formerly Allied Bank of Pakistan Limited)</small> <input type="checkbox"/>	 Muslim Commercial Bank <small>(MCCB)</small> <input type="checkbox"/>
Remote Branch: <i>I-8 Markaz Branch Islamabad (0140947)</i> A/C Title: <i>NTS-Pakistan-Collection</i> A/C No. <i>0010008325640018</i> Note: Bank Service Charges Free of Cost	Remote Branch: <i>I-8 Markaz Branch, Islamabad (1501)</i> A/C Title: <i>NTS-Pakistan</i> A/C No. <i>647943831003775</i> Note: Bank Service Charges Free of Cost
 UNITED BANK LTD. <input type="checkbox"/>	 HABIB BANK LTD. <small>THE POWER TO LEAD</small> <input type="checkbox"/>
Remote Branch: <i>Cantt Br Kashmir Road Rawalpindi (0041)</i> A/C Title: <i>NTS- Pakistan</i> A/C No. <i>217767828</i> Note: Bank Service Charges Free of Cost	Remote Branch: <i>H9 Shalimar Recording Co ISB (1742)</i> A/C Title: <i>NTS-Pakistan</i> A/C No. <i>17427900464503</i> Note: Bank Service Charges Free of Cost

***Note:** Desired Bank Stamp is required on the Deposit Slip & Send Original Deposit Slip (NTS Copy) along Application Form to NTS Office

Application Form will not be entertained without Original Deposit Slip (NTS Copy)

Applicant's Name:
Father Name:
CNIC No/ B Form No:
Post Name:

Amount Rs: 2000/-	Amount in word: Rs. Two Thousand Rupees Only
Non Refundable/ Non Transferable	

Applicant Signature

Cashier

Officer



National Testing Service-Pakistan





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BANK COPY

AZAD JAMMU & KASHMIR COUNCIL

Branch Code: _____ Date: _____

Branch Name: _____

 Allied Bank Limited <small>(Formerly Allied Bank of Pakistan Limited)</small> <input type="checkbox"/>	 Muslim Commercial Bank <small>(MCCB)</small> <input type="checkbox"/>
Remote Branch: <i>I-8 Markaz Branch Islamabad (0140947)</i> A/C Title: <i>NTS-Pakistan-Collection</i> A/C No. <i>0010008325640018</i> Note: Bank Service Charges Free of Cost	Remote Branch: <i>I-8 Markaz Branch, Islamabad (1501)</i> A/C Title: <i>NTS-Pakistan</i> A/C No. <i>647943831003775</i> Note: Bank Service Charges Free of Cost
 UNITED BANK LTD. <input type="checkbox"/>	 HABIB BANK LTD. <small>THE POWER TO LEAD</small> <input type="checkbox"/>
Remote Branch: <i>Cantt Br Kashmir Road Rawalpindi (0041)</i> A/C Title: <i>NTS- Pakistan</i> A/C No. <i>217767828</i> Note: Bank Service Charges Free of Cost	Remote Branch: <i>H9 Shalimar Recording Co ISB (1742)</i> A/C Title: <i>NTS-Pakistan</i> A/C No. <i>17427900464503</i> Note: Bank Service Charges Free of Cost

***Note:**

1. Please Stamp both copies of deposit Slip.
2. The Bank Must Return "NTS Copy" to the Candidate.
3. Deposit Slip will not accepted without Candidate CNIC/ B Form No.

Applicant's Name:
Father Name:
CNIC No/ B Form No:
Post Name:

Amount Rs: 2000/-	Amount in word: Rs. Two Thousand Rupees Only
Non Refundable/ Non Transferable	

Applicant Signature

Cashier

Officer