



**GOVERNMENT OF KHYBER PAKHTUNKHWA
HEALTH DEPARTMENT**

3. EXPERIENCE / EMPLOYMENT HISTORY

Job Title	Organization Name	From	To	Experience Year/Months/ Days

4. TRAININGS/SEMINARS/CONFERENCES

Course Title	Name of Institution	Starting Date	Ending Date	Duration

Note:

- All the documents should be attached in the following sequence:
 1. Application Form
 2. CNIC
 3. Domicile Certificate



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4. Academic Certificates
 5. Experience Certificates
 6. Conferences/Seminars/Training Certificates
- NOC must be provided with application; in case the applicant is a Government Servant
 - In case of incomplete information, application will be declined