

**APPLICATION FORM FOR THE POST OF CHIEF EXECUTIVE OF PUBLIC
SECTOR COMPANY**



(Photograph)

1. Post applied for _____

2. Name _____

3. Father's Name _____

4. Date of Birth _____

5. Nationality _____

6. CNIC No. _____

7. National Tax No. _____

8. Full Mailing address (with Telephone-landline & Mobile No. and E-Mail address)

9. Educational & Professional Qualification (From Graduation)

S.No.	Course	Subjects	University/Institute	Year of Passing	Division/Class
1.					
2.					
3.					

10. Work Experience:

S.No	Organization	Post Held	Period (From - To)		Nature of Work/ Area of Specialization
1.					
2.					
3.					

11. Fitness and propriety for the job in line with the Fit and Proper Criteria (not more than 500 words):

12. Strategic vision for improving the performance and financial position as the potential chief executive of the public sector company (not more than 500 words):

13. Directorship in other companies:

(a) Past (during last five years) _____

(b) Present _____

Signature:

Full Name (in Block Letters),
Designation, NIC Number,
and Full Address

Date _____

(Note: Any information not provided will render the application incomplete and liable for rejection.)

DECLARATION TO ACCOMPANY THE APPLICATION FORM FOR THE POST OF CHIEF EXECUTIVE OF PUBLIC SECTOR COMPANY

i. I son of, holder of CNIC No. hereby declare that I am not ineligible to act as a Chief Executive in terms of the Fit and Proper Criteria issued by the Securities and Exchange Commission of Pakistan vide the Public Sector Companies (Appointment of Chief Executive) Guidelines, 2015 as required in terms of the Public Sector Companies (Corporate Governance) Rules 2013, or any other relevant provisions of the Companies Ordinance, 1984; and

ii. I further declare that I am not suffering from any present or perceived conflict of interests, which would interfere with the exercise of independent judgment when acting in the capacity of chief executive of the company, and would be disadvantageous to the interests of the public sector company.

Signature:

Full Name (in Block Letters), Designation, NIC Number, and Full Address

Date:

Place:



Witness to the signature:

Signature:

Full Name, Father's/ Husband's Name (in Block Letters)
NIC Number,
Occupation Full Address

Note: To be made on stamp paper of requisite amount duly verified by Oath Commissioner
