



KING EDWARD MEDICAL UNIVERSITY LAHORE

OFFICE OF THE CONTROLLER OF EXAMINATIONS

042-99214688, 042-9921145-54 Ext.176, Fax. 042-37312693

The Controller of Examinations,
King Edward Medical University,
Lahore.

Affix
Photographer

Subject: APPLICATION FOR SUPERVISORY STAFF DUTY IN EXAMINATIONS

Applying for: (Multiple options can be selected)

Superintendent ☐ **Deputy Superintendent** ☐ **Invigilator** ☐ **Waterman** ☐

Full Name: _____ Father/Husband Name: _____
(As per CNIC)

Designation: _____ Institute: _____

CNIC No.: _____ Contact No.: _____ E-mail. Address: _____

Official Address: _____

Bank & Branch Name: _____ Branch Code: _____

IBAN & A/C No. : _____

Last Academic Degree (Latest Qualification): _____

Experience as Supervisory Staff:

Sr. No.	Name of Institute	Appointed As
1.		
2.		
3.		

I solemnly declare that above information is correct in all aspects.

Signature of Applicant: _____

Recommendation from head of the Institute

I certify that the above information is correct as per my best knowledge and I further recommend him/her for the duty of supervisory staff.

Date: _____ Signature: _____
With Stamp