NATIONAL INTERNSHIP PROGRAM-2009
APPLICATION FORM

Personal details

Name: _____

Date of Birth: Day _____ Month _____ Year _____

Father's Name: _____

Gender: Male/Female (please tick the relevant)

CNIC Number: | | | | | | — | | | | | | | | | — | |

Education

Title of final degree: _____ Subject: _____ Year of Passing: _____

Grade/Division: _____ Marks obtained/(%age/CGPA): _____

Roll No: _____ University Registration/Enrollment No: _____

Name of University: _____

_____

Placement details

Domicile: District _____ Province _____

List names of three Districts in order of your preference for placement under the National Internship Program. This listing indicates your preference/ convenience. However, the government can place you anywhere for the National Internship Program according to availability of places for internship.

First (District) _____ Second (District) _____ Third (District) _____

Contact details

Phone No.(Res): _____ Cell No: _____

Fax No: _____ E-mail: _____

Permanent Address: _____

_____

_____

Mailing Address:

_____

_____

_____

Did you apply for NIP previously? ☐ Yes ☐ No

If yes, please, mention your Reference No. _____

Have you already availed internship under the NIP ☐ Yes ☐ No

Declaration: By signing below you will be certifying that statements you have made in this application are correct to the best of your knowledge and belief; and that you agree that you meet the eligibility criteria for the internship program. Submission of incorrect information may lead to strict legal action and debarring you from future internship under NIP.