

**LAHORE GARRISON EDUCATION
SYSTEM (LGES) SECRETARIAT**

Askari Bank Account No 0011-165-05000-78

Date _____

Name of Candidate _____

S/D/O _____

In compliance with Selection of Teachers

For attention of Candidate

1. Please deposit required amount in any Askari Bank Lahore.
2. Please attach original challan form with the application duly endorsed by the Bank.

S/No	Particulars	Rupees
1.	Application Fee	Rs. 1,000/-
2.		/
3.		/
	Total	Rs. 1,000/-

Rupees in words One Thousand only

Deposited by _____

Received by _____

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ROLL NO SLIP

Paste
Passport size
Photograph

1. Roll No _____
(To be allotted by the office)
2. Subject in which Appearing _____
3. Test Date and Venue: **28 September 2019 (Saturday) in Gar Junior Academy, Sarwar Road, Lahore Cantt**
4. Time: **Reporting Time: 09:30 AM Test Starting Time: 10:00 AM**
5. Name in Full: _____
(As per CNIC)
6. Father's Name: _____
7. Husband's Name: _____
(If married)
8. Candidate CNIC #: _____
9. Present Address: _____
10. Mobile No: _____
(Mandatory)
11. Candidate's Signature _____

Note:

- Candidates will bring their original CNIC for identification on the Test Day.
- Mobile Phone/Calculator is not allowed in the test centre.

Issuing Authority
LGES Secretariat
9-Link Tufail Road,
Lahore Cantt

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LGES Secretariat
9-Link Tufail Road,
Lahore Cantt



APPLICATION - FACULTY
LAHORE GARRISON EDUCATION SYSTEM (LGES)

Paste
Passport size
Photograph

1. Desired category & Subject (Fill only one Box)

Desired Category	Desired Subject
Senior / Middle School	Master Degree with minimum 2 nd Division in following subjects: <input type="checkbox"/> English <input type="checkbox"/> Urdu <input type="checkbox"/> Fine Arts <input type="checkbox"/> Physics <input type="checkbox"/> Islamiyat <input type="checkbox"/> Sport Sciences <input type="checkbox"/> Chemistry <input type="checkbox"/> Geography <input type="checkbox"/> Library Science <input type="checkbox"/> Biology <input type="checkbox"/> History/Pak Studies <input type="checkbox"/> Mathematics <input type="checkbox"/> Computer Science
Junior/Pre School (Female Only)	<input type="checkbox"/> Montessori Qualified (MA/MSc/BSc/BA minimum 2 nd Division with diploma in Montessori) <input type="checkbox"/> General Teacher MA/MSc/BSc/BA preferably B.Ed or O-Level minimum 2 nd Division)

Ineligibility

- **MA/BA Private**
- **MA/BA 3rd Division**

NOTE: CANDIDATES WILL APPLY ONLY FOR ONE CATEGORY OF SPECIFIC SUBJECT
CANDIDATES AWAITING RESULTS WILL ATTACH HOPE CERTIFICATE

2. Personal Information: Use CAPITAL letters and leave spaces between words.

a. Name in Full: _____
 (As per CNIC)

b. Father's Name: _____

c. Husband's Name: _____
 (If married)

d. Number of School Going Children with class & age: _____

e. Religion: _____ f. Sect: _____

g. Candidate CNIC #: _____ h. Gender Male Female

j. Date of Birth: _____ - _____ - _____ k. E. mail: _____

l. Present Address: _____

m. Phone No: (Res) _____ Mobile (1) _____ (2) _____
 (Mandatory)

3. Academic Information

Certificate / Degree Level	Major Subjects	Year of Passing	Obtained Marks/ CGPA	Division	Regular/ Private	Institution	Board/ University
Matric							
FA / FSc							
BA / BSc							
MA / MSc Or BSc (Hons) (4 years)							
MS / M. Phil							
Diploma (Only Montessori)							

NOTE: Please attach certified photocopies of above mentioned documents. (All columns must be filled)

4. Training / Certifications / Skills

Detail	Name of Institution	Grade / Division

5. Professional Experience (Only teaching experience required. Provide complete information)

Name of Institution	Job Title	Duration	
		From	To

6. Detail of family members already serving in LGES Institutions:

Name	Relationship	Institution in which Serving

7. Detail of children studying in LGES Institutions:

Name	Relationship	Class in which Studying	Institution in which Studying

HOW I SEE MYSELF IN NEXT 10 YEARS

(To be written with own handwriting)

Undertaking by the Applicant

I _____ D/S/W of _____ do hereby solemnly affirm that I have read and understood the eligibility conditions as given in advertisement and that I have correctly filled the form and in the event any information contained herein is found to be untrue at any stage, I shall be liable to disciplinary action and dismissal without benefits.

Date: _____

Signature of the Candidate _____

Help Line:

Phone No. Lhr: 99220787

Website: www.lges.edu.pk

Director HRM
Lahore Garrison Education System
9-Link Tufail Road,
Lahore Cantt.