



Employee Card Printing Form

Employee Code:-
Name:-
Father Name:-
CNIC #:-
Address:-
Land Line No:-
Cell No:-
Email: - @
Gender:-
Religion:-
Marital Status:-
Blood Group:-
D.O.B:-

Photo

Campus:-
Designation:-
Employee Type: - Regular, Visiting, Contract
BPS:-
Department:-
Date of Appointment:-
Date of Joining:-
Verified By:-
Approved By Additional Registrar:-
Card Issued By:-
Card Received By:-

Please attach copy of following documents.

1. CNIC
2. Appointment Letter
3. Joining Notification
4. Passport size photo.