

**CONFIDENTIAL**

**PROFORMA FOR SECURITY CLEARANCE**  
**PIEAS / KINPOE**

Photograph

1. Name \_\_\_\_\_ Gender \_\_\_\_\_
2. Father's Name \_\_\_\_\_
3. Date & Place of Birth \_\_\_\_\_
4. Nationality \_\_\_\_\_ Religion \_\_\_\_\_ Sect \_\_\_\_\_ Caste \_\_\_\_\_
5. CNIC No (Attach Photocopy) \_\_\_\_\_
6. Present Address & Tele No. \_\_\_\_\_
7. Permanent Address \_\_\_\_\_

8. Names of two references who can testify the candidate's character/antecedents:-

Name	Address	Contact Number

9. Edn/Qualification/Expertise \_\_\_\_\_
10. Session (Duration of Studies) \_\_\_\_\_
11. Last Institution attended \_\_\_\_\_
12. Dual Nationality (if held) \_\_\_\_\_
13. Mobile Phone No. and Email \_\_\_\_\_
14. Foreign countries visited during last 5 years \_\_\_\_\_

Name of Country	Purpose

Place: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Roll No. Allotted by PIEAS: \_\_\_\_\_

*Countersigned*

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**PROFORMA**  
**INTERNSHIP / FELLOWSHIP**  
**STRATEGIC COMMISSIONS**

1.	Name (s) of Internee:		
2.	Son / Daughter of :		
3.	CNIC No:	<input type="text"/>	<input type="text"/>
4.	Desired schedule of Internship:	From	To
	a. Duration:	2018	2020
	b. Recommending University :	PIEAS	KINOPE
5.	Venue to be visited:	PIEAS / KINPOE	
6.	Category:	-----	
7.	Security Status – Cleared by SIT (In case Yes, attach photocopies)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8.	Bio data of Internee attached:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9.	Any other significant information:		