

**Federal Directorate of Education,****Profile of Computer Science Faculty on Contract**

**Please note that this information should be reliable and very accurate as per the records and use separate photocopy of this proforma for each CS contractual employee. i.e CSL, SCT, CLI and CLA**

**Basic Information**

<b>Institution Name: (Short Form)</b>			
<b>Educational Sector:</b> <input type="checkbox"/> 1: City (Urban) <input type="checkbox"/> 2: Sihala <input type="checkbox"/> 3: Bhara Kau <input type="checkbox"/> 4: Nilore <input type="checkbox"/> 5: Tarnol			Office Phone #
<b>Inst Category</b>		<input type="checkbox"/> 1: FG Sec. School <input type="checkbox"/> 2: FG HSec. School <input type="checkbox"/> 3: Islamabad Model College <input type="checkbox"/> 4: FG College	
<b>For</b>	<input type="checkbox"/> 1: Boys/Men <input type="checkbox"/> 2: Girls/Women <input type="checkbox"/> 3: Co-Education	<b>Total Computer Labs</b>	No of Computers
Total number of Students in all classes who have taken <b>CS as Regular Subject</b> in your Institution		Total number of other Students who are benifitting from this CS Laboratory and staff (Estimated)	
Sanctioned Posts: Lecturers CS _____ SCT _____ CLI _____ CLA _____			Total Vacant: _____

**PERSONAL INFORMATION COMPUTER SCIENCE EMPLOYEE ON CONTRACT**

<b>Post Held :</b> <input type="checkbox"/> 1: Lecturer Computer Science <input type="checkbox"/> 2: Sr. Computer Teacher <input type="checkbox"/> 3: Comp. Lab Incharge <input type="checkbox"/> 4: Comp. Lab Attendant			
In which Project you were working prior to creation of Posts: <input type="checkbox"/> 1: Project 25 <input type="checkbox"/> 2: Project 35 <input type="checkbox"/> 3: Project 81			
<b>Employee Name:</b>		<b>Gender</b>	<input type="checkbox"/> 1: Male <input type="checkbox"/> 2: Female
<b>NIC #</b>		<b>Date of Birth</b>	dd mm yy
<b>Father's Name</b>	Mr.		
<b>Domicile:</b>	<input type="checkbox"/> 1: Punjab <input type="checkbox"/> 2: Sindh U <input type="checkbox"/> 3: Sindh R <input type="checkbox"/> 4: NWFP <input type="checkbox"/> 5: Balochistan <input type="checkbox"/> 6: AJK <input type="checkbox"/> 7: FANA-FATA <input type="checkbox"/> 8: Federal (ICT) Specify District: _____		
<b>Permanent Address:</b>			
<b>Present Address:</b>			
<b>Contact Information</b>	<b>Mobile #</b>	<b>Phone # (Res)</b>	<b>Email</b>
<b>On Temporary Duty?</b> <input type="checkbox"/> 0: No <input type="checkbox"/> 1: Yes	<b>Posting Authority</b>	Institute of Actual Posting	<b>Date of Temp Posting</b>
<b>Date of Joining Service (dd-mm-yy)</b>	dd mm yyyy	<b>Total Length of Service As on 31-12-2009</b>	Years Months
<b>Highest Academic Qualification (Computer Science) (Do not select if in progress)</b>	<input type="checkbox"/> 1: Ph.D <input type="checkbox"/> 2: MS <input type="checkbox"/> 3: Master CS <input type="checkbox"/> 4: Graduation ____ Years ( ) <input type="checkbox"/> 5: Intermediate <input type="checkbox"/> 6: Matric <input type="checkbox"/> 7: Under Matric <input type="checkbox"/> 8: Others _____		
<b>Have you any third division in your academic career?</b> <input type="checkbox"/> 0: No <input type="checkbox"/> 1: Yes	Division (Qualification mentioned above):		
<b>Teaching Qualification (if acquired):</b>	<input type="checkbox"/> 1: P.T.C.	<input type="checkbox"/> 2: C.T.	<input type="checkbox"/> 3: B. Ed <input type="checkbox"/> 4: M. Ed
<b>Professional Certifications / Courses (Select all applicable)</b>	<input type="checkbox"/> 1: MCP <input type="checkbox"/> 2: MCSE <input type="checkbox"/> 3: MCDBA <input type="checkbox"/> 4: CCNA <input type="checkbox"/> 5: CCNP <input type="checkbox"/> 6: CCIE <input type="checkbox"/> 7: ComPTIA A+ <input type="checkbox"/> 8: PGD <input type="checkbox"/> 9: Associate Engineering (3 Years) <input type="checkbox"/> 11: Diploma ( ) Moths <input type="checkbox"/> 12: Others (Specify) _____		
<b>Where are you residing?</b>	<input type="checkbox"/> 1: Family House <input type="checkbox"/> 2: Hostel <input type="checkbox"/> 3: Rented House <input type="checkbox"/> 4: others _____		
Is your brother or Sister also working on such contract? <input type="checkbox"/> 0: No <input type="checkbox"/> 1: Yes	Name Designation		

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Signatures of the Person Concerned (Checked by the Admn Officer) Verified by the Principal (Date)