

		<b>CIVIL AVIATION AUTHORITY</b>				<b>CAAF-001-HRRS-1.0</b>	
		<b>BIO DATA FORM</b>					
<i>Human Resource (R &amp; S Branch)</i>							
COMPUTER NUMBER (FOR OFFICIAL USE ONLY)							
<b>ADVERTISEMENT NO. &amp; S. NO.</b>				<b>POST APPLIED FOR</b>			
<b>NAME</b>				<b>SEX</b>		<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
<b>FATHER'S NAME</b>					<b>NATIONALITY</b>		
<b>DATE OF BIRTH</b>		<b>RELIGION</b>		<b>DOMICILE</b>		<b>DISTRICT</b>	
<b>QUALIFICATION</b>		<b>DIVISION / GRADE</b>		<b>SUBJECT</b>			
<b>HIGHER QUALIFICATION</b>		<b>DIVISION / GRADE</b>		<b>SUBJECT</b>			
<b>COURSE</b>		<b>CPL LICENSE / FLYING HOURS</b>				<b>TYPING SPEED</b>	
		<input type="checkbox"/> YES <input type="checkbox"/> NO / HOURS (         )					
<b>EXPERIENCE</b>							
<b>HAVE VALID DRIVING LICENSE?</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO		<b>TYPE</b>		<input type="checkbox"/> LTV <input type="checkbox"/> HTV	
						<b>HEIGHT</b>	
<b>POSTAL ADDRESS</b>							
<b>TELEPHONE # (RESIDENCE)</b>				<b>MOBILE #</b>		<b>TELEPHONE # (OFFICE)</b>	
<b>CNIC NO.</b>				<b>CHOICE OF TEST CENTRE</b>			
<b>BANK DRAFT / PAY ORDER NO. / DATE</b>				<b>BANK'S NAME</b>			
<b>FOR ARMED FORCES PERSONNEL / GOVERNMENT SERVANTS ONLY</b>							
<b>ARMED FORCES</b>						<b>YEARS</b>	
<b>GOVERNMENT SERVICE</b>						<b>YEARS</b>	
_____				_____			
DATE				SIGNATURE			

Note: Only fill the relevant columns. Write N/A if not relevant.