



SOCIAL EDUCATIONAL AND PEACE ORGANIZATION (SEAPO)
Suit No.16, 2nd Floor Al-Sayyed Plaza Abdara Chowk University Road, Peshawar
www.seapo.org.pk | info@seapo.org.pk
Ph: 091-9218100 | 0332-8597525 | 03009030839

Application Form for Education Officer

Applying for District _____

Personal Information

| | | | |
|-------------------|--|---------|--|
| Name of Applicant | | | |
| Domicile | | | |
| PTCL No | | Mob No: | |
| CNIC No | | | |
| Email | | | |

Education

| Qualification | Institution | Year |
|---------------|-------------|------|
| | | |
| | | |
| | | |
| | | |

Experience: Job Business Retired

| | | | |
|-----------------------------------|---|--|--|
| Employed, Job Experience | <input type="radio"/> Less than 3 years | <input type="radio"/> Less than 7 years | <input type="radio"/> More than 10 years |
| If Already in Business | <input type="radio"/> Sole - Proprietorship | <input type="radio"/> Franchise / Dealership | <input type="radio"/> Public / Pvt Partnership |
| Nature of Business | <input type="radio"/> Retail | <input type="radio"/> Whole Seller | <input type="radio"/> Service Industry <input type="radio"/> Consultancy |
| If Served in Education Department | <input type="radio"/> Less than 3 years | <input type="radio"/> Less than 7 years | <input type="radio"/> More than 10 years |

References (If available)

| | | | |
|-------------|--|-------------|--|
| Reference 1 | | Reference 2 | |
| Contact No | | Contact No | |

Proposed Location for SEAPO Admission Office

| | City | Location / Area within City |
|-------------|------|-----------------------------|
| Pferences-1 | | |
| Pferences-2 | | |

Property for the office (Preference)

- Status of Property Owned Rented To be arranged
- Type of Property Residential Commercial

Institutions in neighborhood

| Name of Institution & Location | No of Students | Building Rentals |
|--------------------------------|----------------|------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

Financial Strength

- Please mention your Proposed Investment in Rs. _____
- How do you plan to finance this Office : my own Partnership Loan

Any other relevant information that can support your application

Signature of the Applicant _____

For Office Use Only

| | | | | | | |
|--------------------------------|----------|-----------------------|----------|-----------------------|---------------------|-----------------------|
| Acceptance of Personal Profile | Accepted | <input type="radio"/> | rejected | <input type="radio"/> | under consideration | <input type="radio"/> |
| Suitability of suit | Accepted | <input type="radio"/> | rejected | <input type="radio"/> | under consideration | <input type="radio"/> |
| Financial strength | Accepted | <input type="radio"/> | rejected | <input type="radio"/> | under consideration | <input type="radio"/> |
| Business strength | Accepted | <input type="radio"/> | rejected | <input type="radio"/> | under consideration | <input type="radio"/> |

Approved by Project Director Accepted Rejected Under consideration

Remarks of the Director _____

Note: All applicants are required to fill this application form, attach CNIC copy, 1 Photo & send to:

Project Director (SEAPO), Suit No.16, 2nd Floor Al-Sayyed Plaza Abdara Chowk, University Road, Peshawar.

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