

## South Asian Association for Regional Cooperation (SAARC) SAARC ENERGY CENTRE (SEC)

H. No. 255, Akram Road, Bani Gala, Islamabad 44000 – Pakistan

## **APPLICATION FORM FOR RESEARCH FELLOW (ENERGY, TRANSPORT & ENVIRONMENT)**

| Posi     | tion applied for:   |            |
|----------|---|------------|
| 1.       | Name (as per certificates):   |            |
| 2.       | Present Postal Address:   | Photograph |
| 3.       | Mailing Address (If different than the present address):  |            |
| 4.       | Permanent Postal Address:   |            |
| 5.       | Email ID: Cell No:  |            |
| 6.       | (a) Place of Birth (b) Date of Birth Day  |            |
| 7.       | (a) Citizenship at Birth: (b) Present Citi  | zenship:   |
| 8.<br>9. | Gender (Please check one):  Marital Status (Please check one):  Married Single Widowed Divorced | Separated  |
| 10.      | Do you have any dependants? Yes No  |            |

In case, answer is "Yes", please provide the following information

|     | Name   | Date of Birth                   | Relationship                         |
|-----|--|---------------------------------|--------------------------------------|
|     |  |                                 |                                      |
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| .1. |  |                                 | y other than that of your nationalit |
|     | Yes In case, answer is "Yes", where we have a second | No                              |                                      |
| 2.  |  | gal steps towards changing your |                                      |
|     | Yes  | No                              | p                                    |
|     | If answer is "Yes", please p   | rovide details:                 |                                      |
|     |  |                                 |                                      |

| Name and Place of Institution along with latest QS Ranking; (Engineering & Technology) and/or (Social Sciences & Management) where applicable | Degree/Diploma | Year | Duration<br>(Year) | Major Subject(s) |
|---|----------------|------|--------------------|------------------|
|   |                |      |                    |                  |
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|                  | A. Exact Title       | of Position                      | Peri  | od       |              |
|------------------|----------------------|----------------------------------|---|----------|--------------|
|                  | A. LAGCE THE         | e oi rosidoli                    | From  | То       |              |
| Name of          | Supervisor           |                                  | Kind of Employ<br>ised by you                 | ees      | Duty Station |
| me and Addres    | s of Employer        |                                  |   |          |              |
|                  |                      |                                  |   |          |              |
| <u> </u>         | es and Achieveme     | nts (Maximum 1                   | 50 words)                                     |          |              |
| <u> </u>         | ring, if applicable. |                                  | 50 words)                                     | od       |              |
| <u> </u>         |                      |                                  | ·   | od<br>To |              |
| ason(s) for leav | ring, if applicable. | e of Position  Number and        | Peri  | То       | Duty Station |
| Name of          | B. Exact Title       | e of Position  Number and        | Peri<br>From<br>(ind of Employ                | То       | Duty Station |
| Name of          | B. Exact Title       | e of Position  Number and Superv | Peri<br>From<br>(ind of Employ<br>ised by you | То       | Duty Station |

| C. Exact Title of Position | Per  | iod |
|----------------------------|------|-----|
| C. Exact Title of Fosition | From | То  |
|                            |      |     |

|                      | Supervisor                               | Supervised by        | Employees<br>you | <b>Duty Station</b>                   |
|----------------------|--|----------------------|------------------|---------------------------------------|
|                      |  |                      |                  |                                       |
| Name and Address     | of Employer                              |                      |                  |                                       |
|                      |  |                      |                  |                                       |
| Key Responsibilities | and Achievemen                           | ts (Maximum 150 word | ds)              |                                       |
| Reason(s) for leavir | ng, if applicable.                       |                      |                  |                                       |
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| Yes                  | ublications in the pok(s), etc.), add ro |                      |                  | mployer?<br>quote reference(s) of the |
|                      |  |                      |                  | Inches to Paralle to                  |
| Sr. No.              | Title of<br>Publication                  | Year                 | Referer          | nce Impact Factor                     |
| Sr. No.              |  | Year                 | Referer          | nce Impact Factor                     |
| Sr. No.              |  | Year                 | Referer          | Impact Factor                         |

| Langua<br>nguage    | Read                          |            | e check   | Write  air Excellent Good |  | add rov | Speak      |     |
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|                     |                               |            |           |                           |  |         |            |     |
| Memb                | er of profess                 | sional ins | titution( | s):                       |  |         |            |     |
| Refere<br>qualifi   |                               |            | ns not r  | elated to you             |  |         |            | ind |
| . Refere<br>qualifi | ences (list thr<br>cations.): |            | ns not r  |                           |  |         | naracter a | ind |

| 23. Please s       | tate any disa | bilities which m              | night limit your perfo | ormance:       |  |
|--------------------|---------------|-------------------------------|------------------------|----------------|--|
|                    |               |                               |                        |                |  |
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|                    |               |                               |                        |                |  |
| -                  |               | -                             | • •                    |                | implete and correct to<br>nent or any required |
| information        |               | this document even if an appo | , .                    |                | ithdrawal of offer of                          |
| appointment        | or dismissal, |                               | intment has already    | y been made an | a acceptea.                                    |
| appointment        | or dismissal, |                               | ointment has airead    | , been made an | а ассертеа.                                    |
| appointment  Date: |               |                               |                        |                | a accepted.                                    |

**INSTRUCTIONS:** Please fill up this Application Form completely and clearly by typing-in and send it on the given email ID along with scan copies of all the relevant documents. Handwritten applications will not be considered for selection. Ensure to insert your scanned signature and date on this Form.

## **CERTIFICATE FROM THE CONCERNED MINISTRY/EMPLOYER**

(Applicable for Public Sector Applicant Only)

| I do hereby certify that Dr./Mr./Ms./Mrs. |   |
|---|---|
| Designation                               | in the Department/ Ministry of                          |
|   | SAARC Energy Centre, Islamabad, Pakistan per stipulated |
| date if he/she is appointed as            | by the SAARC  |
| Energy Centre (SEC), Islamabad, Pakistan. |   |
|   |   |
|   |   |
| Date:                                     | Signature:  |
|   | Name:   |
|   | Address:  |
| Officer Seal                              |   |