



HORIZON TESTING SERVICE

A Sign of Hope

APPLICATION FORM

Reg. No _____

Saeed Muhammad (C.E.O FC Harnai Coal Project)

Project ID N-001

Scholarships for the students of Balochistan in all categories

Screening Test for MS/MPhil

Picture 1

Paste your recent passport size color photograph.

تصویر لازماً منسلک کریں بصورت
دیگر فارم عمل میں نہیں لایا جائیگا۔

A. Is your age according to the desired category at the date of 25-01-2020

Yes

No

B. Do you possess required Qualification as asked in advertisement?

Yes

No

C. Are you Domiciled in Balochistan.

Yes

No

If your reply is "Yes" to A, B, C above, only then please proceed further. Otherwise you are not eligible to apply.

Bank Online Deposit of Rs. 650 /- from Designated Bank Branches

Bank Name	<input type="checkbox"/> UBL	<input type="checkbox"/> Meezan	<input type="checkbox"/> Sindh
Bank Code			
Deposit Amount			

Note: Application Form will not be entertained without Original Deposit Slip (HTS Copy)

Fill Only One Box for Desired category. (Mandatory)

To apply for more than one category, please use separate form. This form will be considered valid only for the single selected category in the sequences. However, you can use single envelope.

Science

Arts

3. Others _____
(Write the name of your degree)

Personal information:

Use CAPITAL Letters and leave spaces between words.

03. Name in Full: _____

Candidate's CNIC#: _____

04. Father Name in Full: _____

05. Father's CNIC#: _____

06. Gender: Male Female

07. Date of Birth: _____
Write your Correct Date of Birth According to matric certificate

08. Postal Address: _____
Only for information HTS will not issue Roll No Slip through courier/Postal Service, Candidate must require to take electronic print out of Roll No. (having picture of candidate) from HTS website for appearing in test

City: _____ District: _____

09. Phone No: (OFF) _____ (Res.) _____ Mobile: _____
City Code-Phone No DO NOT give your portable mobile number (which is converted from one network to another) so that SMS delivery is ensure.

10. Religion: Muslim Non-Muslim

DESIRED TEST CENTER

(Fill only one box)

Choose your desired test center from the following provided (Tehsil & District Centers)

Note: - Minimum of 100 candidate per center otherwise candidates will be assigned next nearest test center.

S#	City	<input type="checkbox"/>	S#	City	<input type="checkbox"/>	S#	City	<input type="checkbox"/>
001	Quetta	<input type="checkbox"/>	019	Lasbela	<input type="checkbox"/>	037	Panjgur	<input type="checkbox"/>
002	Kuchlak	<input type="checkbox"/>	020	Bela	<input type="checkbox"/>	038	Naseerabad	<input type="checkbox"/>
003	Pishin	<input type="checkbox"/>	021	Hub	<input type="checkbox"/>	039	D. M Jamali	<input type="checkbox"/>
004	Hurramzai	<input type="checkbox"/>	022	Mastung	<input type="checkbox"/>	040	Jaffarabad	<input type="checkbox"/>
005	Saranan	<input type="checkbox"/>	023	Dasht	<input type="checkbox"/>	041	Usta Muhammad	<input type="checkbox"/>
006	Barshore	<input type="checkbox"/>	024	Awaran	<input type="checkbox"/>	042	Jhall Magsi	<input type="checkbox"/>
007	Khanozai	<input type="checkbox"/>	025	Sikandarabad	<input type="checkbox"/>	043	Kachhi	<input type="checkbox"/>
008	Chaman	<input type="checkbox"/>	026	Slbi	<input type="checkbox"/>	044	Dhadar	<input type="checkbox"/>
009	Killa Abdullah	<input type="checkbox"/>	027	Lehri	<input type="checkbox"/>	045	Sohbatpur	<input type="checkbox"/>
010	Nushki	<input type="checkbox"/>	028	Kohlu	<input type="checkbox"/>	046	Farid Abad	<input type="checkbox"/>
011	Chagai	<input type="checkbox"/>	029	Dera Bugti	<input type="checkbox"/>	047	Loralai	<input type="checkbox"/>
012	Dalbandain	<input type="checkbox"/>	030	Sui	<input type="checkbox"/>	048	Musakhail	<input type="checkbox"/>
013	Taftan	<input type="checkbox"/>	031	Ziarat	<input type="checkbox"/>	049	Barkhan	<input type="checkbox"/>
014	Kharan	<input type="checkbox"/>	032	Harnai	<input type="checkbox"/>	050	Killa Saifullah	<input type="checkbox"/>
015	Washuk	<input type="checkbox"/>	033	Kech	<input type="checkbox"/>	051	Zhob	<input type="checkbox"/>
016	Kalat	<input type="checkbox"/>	034	Turbat	<input type="checkbox"/>	052	Sheerani	<input type="checkbox"/>
017	Khaliq Abad + Mangocher	<input type="checkbox"/>	035	Gawadar	<input type="checkbox"/>	053	Duki	<input type="checkbox"/>
018	Khuzdar	<input type="checkbox"/>	036	Pasni	<input type="checkbox"/>			

11. Balochistan Divisions: Tick mark your Local Division

1. Kalat Division <input type="checkbox"/>	2. Zhob Division <input type="checkbox"/>	3. Nasirabad Division <input type="checkbox"/>	4. Makran Division <input type="checkbox"/>
5. Rakhsan Division <input type="checkbox"/>	6. Sibi Division <input type="checkbox"/>	7. Quetta Division <input type="checkbox"/>	

Tick Mark only your domicile District

Code	District	<input type="checkbox"/>	Code	District	<input type="checkbox"/>	Code	District	<input type="checkbox"/>	Code	District	<input type="checkbox"/>
001	Awaran	<input type="checkbox"/>	009	Kachi (Bolan)	<input type="checkbox"/>	017	Lasbela	<input type="checkbox"/>	025	Pishin	<input type="checkbox"/>
002	Barkhan	<input type="checkbox"/>	010	Kalat	<input type="checkbox"/>	018	Lehri	<input type="checkbox"/>	026	Quetta	<input type="checkbox"/>
003	Chagai	<input type="checkbox"/>	011	Kechi (Turbat)	<input type="checkbox"/>	019	Loralai	<input type="checkbox"/>	027	Sherani	<input type="checkbox"/>
004	Dera Bugti	<input type="checkbox"/>	012	Kharan	<input type="checkbox"/>	020	Mastung	<input type="checkbox"/>	028	Sibi	<input type="checkbox"/>
005	Gwadar	<input type="checkbox"/>	013	Khuzdar	<input type="checkbox"/>	021	Musakhel	<input type="checkbox"/>	029	Shobatpur	<input type="checkbox"/>
006	Harnai	<input type="checkbox"/>	014	Killa Abdullah	<input type="checkbox"/>	022	Nasirabad	<input type="checkbox"/>	030	Washuk	<input type="checkbox"/>
007	Jafarabad	<input type="checkbox"/>	015	Killa Saifullah	<input type="checkbox"/>	023	Nushki	<input type="checkbox"/>	031	Zhob	<input type="checkbox"/>
008	Jhal Magsi	<input type="checkbox"/>	016	Kohlu	<input type="checkbox"/>	024	Punjjgur	<input type="checkbox"/>	032	Ziarat	<input type="checkbox"/>

District Domicile

12. District of Domicile: - Write Domicile of District Code & Name (Only for Information) District Code List given above

District Code

District Name:

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13. Academic Information: (Please attach (one copy of each) your academic certificates)

- Note: 1. HTS will not issue Roll No Slips to those who have not filled in their academic record properly.
2. Candidate should write their grades (or) CGPA properly.
3. Write exact degree name & Major subject mentioned in certificate/ transcript.

Certificate/Degree Name	Degree Title	Specialization/Maj or Subject	Year Passing	Obtained Marks/CGPA	Total Marks/CGPA	Board/University/Institute
Matric (10 Years)	<input type="checkbox"/> Matric <input type="checkbox"/> Others_____	<input type="checkbox"/> Science <input type="checkbox"/> Art <input type="checkbox"/> Others_____				
Intermediate/ D.A.E (12/13 Years)	<input type="checkbox"/> F.A <input type="checkbox"/> F.Sc <input type="checkbox"/> D.A.E <input type="checkbox"/> Others_____	<input type="checkbox"/> Med <input type="checkbox"/> Engr				
Bachelor (14 Year)	<input type="checkbox"/> B.A <input type="checkbox"/> B.Sc <input type="checkbox"/> Others_____					
Bachelor (Hons)/ Master (16 Years)	<input type="checkbox"/> M.A <input type="checkbox"/> M.Sc <input type="checkbox"/> Others_____	<input type="checkbox"/> Social Science <input type="checkbox"/> Others_____				
MS/M. Phil (18 Years)	<input type="checkbox"/> MS <input type="checkbox"/> M.Phil <input type="checkbox"/> Others_____					

14. Undertaking By the applicant:

<p>_____ d/s/w of _____ do hereby Solemnly declare and affirm that I have read and understood the instructions and conditions for appearing in the HTS Test, and I have filled-up the application form as per criteria according. In case of any information contained herein is found at any stage to be missing, untrue, false or forged, my candidature can be cancelled at any stage (even after selection, if so revealed later), and I shall be liable to legal action.</p> <p>Date _____ Candidate's Signature _____</p>	<p>Picture 2 Affix your recent Passport Size Color Photograph.</p> <p>تصویر لازماً منسلک کریں بصورت دیگر فارم عمل میں نہیں لایا جائیگا</p>
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GENERAL INSTRUCTION/INFORMATION

- Please fill the Application Form Properly with complete and correct information/answers.
- Please DO NOT leave any field blank, otherwise your application may not be considered.
- Incorrect (or) false information may result in cancellation of your candidature at any stage, even after selection, and also proceeding of a legal action.
- Attach your Two recent Passport Size Photographs, Copy of CNIC, Domicile Certificate, Academic Certificates. (Original HTS Challan Copy)
- By Hand submission of Application Form is allowed only to Main Office of HTS.
- Use Separate application form for each post in Single Envelope.

Last date for submission of application form is: 25-01-2020

Help Line: 081-4122377
Email: horizontsqta@gmail.co
Website: www.horizonts.org

**Please Send Application Forms to
Horizon Testing Service (Main Office)**
Address: Office No. 21, 2nd Floor Meraj
Arcade, Opposite to Dr. Manoj Academy,
Model Town, Quetta.

Horizon Testing Service
HTS COPY

Branch Code: _____ Date: _____
Branch Name: _____

ONLINE DEPOSIT SLIP
Please deposit fee in only one bank & tick the relevant bank

United Bank <input type="checkbox"/>	Meezan Bank <input type="checkbox"/>
A/C N Title: Horizon Testing Service	A/C N Title: Horizon Testing Service
A/C No. 000261372739	A/C No. 11040104071003
IBAN- Code: PK96UNIL0109000261372739	IBAN- Code: PK52MEZN0011040104071003
Note: Bank Service Charges Free of Cost	Note: Bank Service Charge Fee of Cost

Sindh Bank <input type="checkbox"/>	
A/C N Title: Horizon Testing Service	
A/C No. 07015493041000	
IBAN- Code: PK46Sind0007015493041000	
Note: Bank Service Charges Free of Cost	

Note: Desired Bank Stamp is required on the Deposit Slip & Send Original deposit Slip (HTS copy) along Application Form to HTS Office. Application Form will not be entertained without Original Deposit Slip (HTS Copy)

Last Date of Fee submission: 25-01-2020

Project ID: N-001
Applicant's Name:
Father Name:
CNIC No/ B Form No:
Applied for: MS/MPhil
HTS Fee: 650/- Amount in Six Hundred & Fifty Rupees Only
Total: 650/- Word: Rs. Non-Refundable/Nontransferable

Applicant Signature Cashier Officer

Horizon Testing Service
BANK COPY

Branch Code: _____ Date: _____
Branch Name: _____

ONLINE DEPOSIT SLIP
Please deposit fee in only one bank & tick the relevant bank

United Bank <input type="checkbox"/>	Meezan Bank <input type="checkbox"/>
A/C N Title: Horizon Testing Service	A/C N Title: Horizon Testing Service
A/C No. 000261372739	A/C No. 11040104071003
IBAN- Code: PK96UNIL0109000261372739	IBAN- Code: PK52MEZN0011040104071003
Note: Bank Service Charges Free of Cost	Note: Bank Service Charges Free of Cost

Sindh Bank <input type="checkbox"/>	
A/C N Title: Horizon Testing Service	
A/C No. 07015493041000	
IBAN- Code: PK46Sind0007015493041000	
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Father Name:
CNIC No/ B Form No:
Applied for: MS/MPhil
HTS Fee: 650/- Amount in Six Hundred & Fifty Rupees Only
Total: 650/- Word: Rs. Non-Refundable/Nontransferable

Applicant Signature Cashier Officer

Horizon Testing Service
Candidate copy

Bank Code: _____ Branch Name: _____ date: _____

ONLINE DEPOSIT SLIP
Please deposit fee in only one bank & tick the relevant bank

UBL Bank Limited <input type="checkbox"/>	Meezan Bank Limited <input type="checkbox"/>	Sindh Bank Limited <input type="checkbox"/>
A/C N Title: Horizon Testing Service	A/C N Title: Horizon Testing Service	A/C N Title: Horizon Testing Service
A/C No. 000261372739	A/C No. 11040104071003	A/C No. 07015493041000
IBAN- Code: PK96UNIL0109000261372739	IBAN- Code: PK52MEZN0011040104071003	IBAN- Code: PK46Sind0007015493041000
Note: Bank Service Charges Free of Cost	Note: Bank Service Charges Free of Cost	Note: Bank Service Charges Free of Cost

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Last Date for fee submission: 25-01-2020

Project ID: N-001
Applicant's Name:
CNIC No/ B Form No:
HTS Fee: 650/-
Total: 650/-

Father Name:	Post Name
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Applicant Signature Cashier Officer