



**DEPARTMENTAL PERMISSION CERTIFICATE
FOR USE OF GOVERNMENT SERVANTS**

(To be detached by the candidate from the Application Form and submitted to his employing Department.)

COMPETITIVE EXAMINATION (CSS), 2020

1. (a) Name of candidate _____
- (b) Father's Name _____
- (c) Designation _____ Basic Scale _____
- (d) Nature of appointment; **daily wages/contingent/adhoc/contract /temporary/permanent** (strike out which is not applicable).
- (e) Nature of the post; **contingent/Project/regular** _____
- (f) Department (with complete address) _____
- (g) Place of duty _____
- (h) Tele (with city code) Office: _____ Res: _____ Mob: _____

2. I have applied to the Federal Public Service Commission, Islamabad for the above Examination on the prescribed form. Necessary departmental permission for applying for the above said examination may kindly be forwarded to the Secretary, Federal Public Service Commission, F-5/1, Aga Khan Road, Islamabad, at the earliest. **Closing date for receipt of application by the Commission is _____.**

3. **I declare that the Department/Office in which I am serving is not an Autonomous/Semi-Autonomous body/organization.**

Signature and Name of Candidate

(TO BE FILLED IN BY THE DEPARTMENT)

No. _____ Date: _____

4. Forwarded; Mr. /Miss/Mrs. _____ is employed in this Department since _____. He/she holds a *contingent/Project/Contractual/Temporary /Permanent post under the *Federal/Provincial Government and is drawing his/her pay in the BS _____.

5. The total period of continuous Government service since _____ rendered by him/ her on **31.12.2019** will be _____ Year(s) _____ Month(s) _____ Day(s).

6. The place of domicile as declared by him/her at the time of first entry into Government Service was _____ (Province/Area in case of Khyber Pakhtoonkhwa whether Khyber Pakhtoonkhwa Provincially Administered Tribal Area/FATA/Khyber Pakhtoonkhwa settled area, and in case of Sindh whether Sindh (Rural) or Sindh (Urban)).

7. His/her character, so far as known to me is good and there is nothing against him/her which may render him/her ineligible for the **Competitive Examination, 2020**.

8. **Certified that this Department/Office is not an Autonomous/Semi-autonomous body/organization.**

Signature:.....
Name:
Designation:
Department:
Telephone No:

**The Secretary,
Federal Public Service Commission,
F-5/1, Aga Khan Road,
Islamabad.**

(Official Stamp must be affixed here)