

## FEDERAL PUBLIC SERVICE COMMISSION <u>DEPARTMENTAL PERMISSION CERTIFICATE (DPC) ROR APPOINTMENT</u> <u>BY TRANSFER IN OFFICE MANAGEMENT GROUP</u>

(To be detached by the candidate from the Application Form and submitted to candidate's employing department before the closing date.)

1.	I have applied for the above departmental permission may kin Closing date is	dly	be :	forw	arde	d	to	the	S	ecret	tary,	F	PSC,	v. Necessary Islamabad.	
2.	I have claimed my particulars and Emplo	ymer	nt Reco	rds	in m	y Ap	plic	atior	i Fo	rm a	s uno	der:-			
(a)	Name of candidate:														
(b)	CNIC No: Contact #														
(c)															
(d)															
(e)	Office:														
(f)	Address:														
			Status of Office/Deptt/ Job									Nature of Job			
Start from first employment in ascending order.  For PC AI SC		relev FGS PGF AFC SGE	vant colo S-Federal E-Provin C- Armed E-Semi C	e one of the following in column  deral Govt. Servant  ovin. Govt. Employee  rmed Forces (Civilian)  mi Govt. Employee  utonomous Body						Pl. write one of the following in relevant column PR-Permanent TM-Temporary/ Regular OF-Officiating DP-Deputation CA-Contract/Adhoc					
<b>S</b> #	EMPLOYMENT RECORDS		Period	(EXACT DAT Please write 'To-date' If st									Nature of Job	Job description	
				d	d	m	m	у	y	у	y		2	ď	
	Post/ Title & BS:		From												
1.	Office/		To									1			
	Orgn.											-			
	& City:		Total:					-	-			<u> </u>			
	Post/ Title & BS:		From						<u> </u>						
2.	Office/ Orgn.		То												
	& City:		Total:					-	-			1			
	Post/ Title & BS:		From												
3.	Office/		<b></b>									-			
	Orgn.		То									-			
	& City:		Total:					-	-						
	Post/ Title & BS:		From												
4.	Office/ Orgn.		То						1			1			
	& City:		Total:					_	-			1			
	Post/ Title & BS:		From												
5.	Office/		<b></b>	<b> </b>					<del> </del>		ļ	-			
	Orgn.		То									-			
	& City:		Total:					-	-						
Extraordinary Leave availed (if any) from			to_					(		у	ears		month	ns days).	
											$\neg$				
Date: (Applicant's signatu			e)									(Cor	ntinue	d overleaf)	

## TO BE FILLED/VERIFIED BY THE DEPARTMENT/EMPLOYER OF THE CANDIDATE The Ministry/Division or Department must process this certificate in the light of FPSC Advertisement and

on selection, the department will have to relieve the Important > This certificate must be processed of	
Note: > The employment record as claimed > This certificate is to be issued after > Deputationists must obtain permiss > To be signed by BS-17/18 Officer a	overleaf, must be checked and verified/ confirmed. obtaining approval of the Competent Authority. sion from his/ her parent Department. nd to be countersigned by BS-19/20 Officer ppointment/ Promotion & Personal Records etc.
File No.	Dated:20
1. It is certified that Mr./Ms	
	BS
in Office (Deptt)	w.e.f
from his/her Personal File No.	claimed overleaf has been checked carefully, it has been confirmed and found in order. However, the employment records at
3. He/she is an officer Federal/Provincial/Regional Governation BS-17 on and BS-18 on	t. /Autonomous Body/Corporation and placed on regular
4. His/Her total period of continuous Governme Month(s) and in BS-18 in (Years _	ent service till closing date in GS-17 is (Years Month(s)
5. As per Appointment by Transfer in OMG (Conducthe exam.	act of Examination) Rules-2020, he/she is eligible to apply and appear in
6. Domicile accepted at the time of entry tnto Gover	rnment Service was
7. No Inquiry Proceedings/ Disciplinary Proceedings	are pending against him/her.
	werse entries do exist in his/her records, extracts of the adverse entries tion of the Commission. Also confirm that the adverse remarks were ding for decision thereon.
9. This DPC is issued with the approval of the Comp (Authority must be mentioned viz Secretary, Joint Sec	petent Authority i.e
Caution: For any error, omission or misreprese	ntation the signatory will be held responsible.
<b>To be signed by</b> BS-17/18 Officer dealing with Administration/ Appointment/ Personal Records	To be countersigned by BS-19/20 Officer dealing with Administration/ Appointment/ Personal Records
Signature: Name	Signature: Name
Official Stamp must be affixed	Official Stamp must be affixed
Tel No:	Tel No:
Note: Incomplete, unsigned or unstamped DPC will not be	accepted.
•	e Secretary eral Public Service Commission

Federal Public Service Commission Aga Khan Road, Sector F-5/1 Islamabad