## APPLICATION FORM FOR THE POST OF MANAGING DIRECTOR



(Photograph)

1. Name	
2. Father's Name	
3. Date of Birth	
4. Nationality	
5. CNIC No	
6. National Tax No	
7. Full Mailing address (with Telephone-landline & Mobile No. and E-Mail address)	

## 8. Educational & Professional Qualification (From Graduation)

Sr. No	Course	Subject	University/Institute	Year of	Division/Class
				Passing	

## 9. Work Experience

Sr. No	Organization	Post Held	Period( From-To)		Nature of Work/ Area of Specialization

10. Fitness and propriety for the job in line with the Fit and Proper Criteria\* (not more than 500 words):

11. Strategic vision for improving the performance and finance	ial position as the potential Managing
Director of Gujranwala Waste Management Company (not mo	ore than 500 words):
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12. Directorship in other companies:	
(a) Past (during last five years)	
(b) Present	
	Signature:
	C
	Full Name (in Block Letters),
	Designation, NIC Number,
	and Full Address
	and run Address
Date	

(Note: Any information not provided will render the application incomplete and liable for rejection, extra sheets may be added if required)

• Refer to SECP:-

http://www.secp.gov.pk/CG/PublicSectorCompanies(ChiefExecutiveAppointment) Guidelines\_2015.pdf

## DECLARATION TO ACCOMPANY THE APPLICATION FORM FOR THE POST OF MANAGING DIRECTOR

- i. I ..... son of ....., holder of CNIC No. .... hereby declare that I am not ineligible to act as a Chief Executive in terms of the Fit and Proper Criteria issued by the Securities and Exchange Commission of Pakistan vide the Public Sector Companies (Appointment of Chief Executive) Guidelines, 2015 as required in terms of the Public Sector Companies (Corporate Governance) Rules 2013, or any other relevant provisions of the Companies Ordinance, 1984; and
- ii. I further declare that I am not suffering from any present or perceived conflict of interests, which would interfere with the exercise of independent judgment when acting in the capacity of chief executive of the company, and would be disadvantageous to the interests of the public sector company.

Signature:

Full Name (in Block Letters),

Designation, CNIC Number,

and Full Address

Date:	 • •	 •	 •	 •	 •	•	•	•	•	•	•	•	
Place:	 	 											

Attested by An oath Commissioner (Under his Stamp)

Witness to the signature: Signature: ...... Full Name, Father's/ Husband's Name (in Block Letters) NIC Number, Occupation Full Address Note: To be made on stamp paper of requisite amount duly verified by Oath Commissioner [CLD/RD/ROC/CG/2004]

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