





TRAFFIC POLICE DRIVING SCHOOL KANJU

ADMISSION FORM

| Admission for: | | Dated: |
|----------------------------------|--------------------|-------------------------------|
| Name: | _ F/Name/Husband: | |
| Date of Birth: | Age: | |
| Occupation: | Qualification: | |
| Gender: Male Female |] | |
| CNIC | | |
| Lerner Permit No | | |
| Permanent Address: City/Village: | Street # | |
| Tehsil: | District | |
| Present Address: City/Village: | Street # | |
| Tehsil: | District: | |
| Cell No | Phone: | |
| Course No. | Class No | - |
| First Shift | Second Shift | |
| | | |
| | | Candidate Signature |
| Fc | or Office Use Only | |
| Name: | _ F/Name/Husband: | |
| Receipt No Book No. | Fee | |
| Dated | | |
| | | |
| | Inch | arge Driving School Signature |