Department Copy *(scan & upload on website while applying)*

Higher Education Department GoAJK	**Amount Payable**

Applicant's Name : _____
 Father's Name: _____
 Address: _____
 _____
 Post Applied for: _____
 Subject: _____
 District/Quota: _____
 Fee must be deposited in the following Account:
   1. **Bank of Azad Jammu & Kashmir**
     Account Title: **DDO Secretariat Higher Education**
     A/C no.: **001-11434001**
     Main Branch Muzaffarabad AJK.
	Fee for test/interview
	 (Adhoc Lecturer B-17)
	
	 Amount (Rs.) _____
	
	 Amount in words: _____
	 _____
	
	 Date: _____
	
	 ------------------------- 	
	 Applicant's Signature

Candidate Copy *(scan & upload on website while applying)*

Higher Education Department GoAJK	**Amount Payable**

Applicant's Name: _____
 Father's Name: _____
 Address: _____
 _____
 Post Applied for: _____
 Subject: _____
 District/Quota: _____
 Fee must be deposited in the following Account:
   2. **Bank of Azad Jammu & Kashmir**
     Account Title: **DDO Secretariat Higher Education**
     A/C no.: **001-11434001**
     Main Branch Muzaffarabad AJK.
	Fee for test/interview
	 (Adhoc Lecturer B-17)
	
	 Amount (Rs.) _____
	
	 Amount in words: _____
	 _____
	
	 Date: _____
	
	 ------------------------- 	
	 Applicant's Signature

Bank Copy *(scan & upload on website while applying)*

Higher Education Department GoAJK	**Amount Payable**

Applicant's Name: _____
 Father's Name: _____
 Address: _____
 _____
 Post Applied for: _____
 Subject: _____
 District/Quota: _____
 Fee must be deposited in the following Account:
   3. **Bank of Azad Jammu & Kashmir**
     Account Title: **DDO Secretariat Higher Education**
     A/C no.: **001-11434001**
     Main Branch Muzaffarabad AJK.
	Fee for test/interview
	 (Adhoc Lecturer B-17)
	
	 Amount (Rs.) _____
	
	 Amount in words: _____
	 _____
	
	 Date: _____
	
	 ------------------------- 	
	 Applicant's Signature