



# EMPLOYEES DATA FORM

**HEALTH DEPARTMENT  
GOVERNMENT OF SINDH**



<b>NAME OF DISTRICT/INSTITUTION</b>			
<b>BPS</b>	<b>CADRE</b>	<b>YEAR OF APPOINTMENT</b>	<b>SENIORITY NO</b>
<b>NAME IN FULL</b>			
<b>FATHER'S NAME</b>			
<b>HUSBAND'S NAME</b>			
<b>DATE OF BIRTH</b>			
<b>DESIGNATION WITH BPS</b>			
<b>DATE OF INITIAL APPOINTMENT</b>	<b>DATE OF REGULAR APPOINTMENT</b>	<b>YEAR OF COMMISSION/REGULARISATION</b>	<b>DATE OF APPOINTMENT IN PRESENT GRADE</b>
<b>PLACE OF POSTING</b>			
<b>DATE OF POSTING AT PRESENT PLACE</b>		<b>DATE OF RETIREMENT</b>	
<b>DISTRICT OF DOMICILE</b>		<b>MARITAL STATUS</b>	
		<b>SINGLE</b>	<b>MARRIED</b>
<b>CNIC NO</b>		<b>PASSPORT NO</b>	
<b>MAILING ADDRESS</b>		<b>CONTACT NO</b>	
		<b>Signature of Employee</b>	

**Verified by: DHO/Head of Institution**

## **INSTRUCTIONS**

(a) **RECEIVABLES (MATERIAL TO BE PROVIDED BY THE DISTRICT/INSTITUTIONS)**

- i. Employees Data Form duly filled by individual staff (A fresh photo affixed on each form).
- ii. Personal files of staff comprising copy of documents and service record.
- iii. Sanctioned & Working strength of staff (BS-1 to BS-20).
- iv. Health facility wise list of doctors/staff.
- v. Consolidated post / cadre/grade wise list of employees.
- vi. Soft copy of above information in a USB.
- vii. 01 personal files of each employee with 03 data forms. One shall be retained at the office of DHO / Head of Institution and one file with 02 data forms shall be handed over to the team.

(b) **DOCUMENTS TO BE SUBMITTED BY DOCTORS / STAFF**

- i. Copy of CNIC
- ii. Three Passport size photographs (Fresh)
- iii. Qualification / Additional Qualification
- iv. Matric Certificate (Showing date of birth).
- v. Appointment notification
- vi. Posting Orders
- vii. Leave / Deputation Order
- viii. Domicile
- ix. Computerized Pay Slip
- x. PMDC Registration Certificate (03)
- xi. Employees 03 Data Form duly filled in & verified by DHO/MS concerned (photo affixed).
- xii. Pending Show Cause Notices (if any).