

### Personal Particulars of Applicant:

Name of Applicant: \_\_\_\_\_ Gender: Male  Female

Address: \_\_\_\_\_

City: \_\_\_\_\_ PTCL Number \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_ CNIC: 

				-											-	
--	--	--	--	---	--	--	--	--	--	--	--	--	--	--	---	--

Highest Academic Qualification: \_\_\_\_\_

### Employment/Business Particulars of Applicant:

Company Name: \_\_\_\_\_ Position Held: \_\_\_\_\_

Company Address: \_\_\_\_\_

Monthly Income/Salary: \_\_\_\_\_ Organization Contact No. \_\_\_\_\_

Nature of Business:  Retail  Whole Sale  Distribution  Service Industry  Consultancy

Other Details: \_\_\_\_\_ Business Experience: \_\_\_\_\_

### Desired Franchise Details:

Status of Proposed Property:  Rented  Owned

In which capacity you are submitting an application for the School Franchise:

Individual Capacity  Partnership  Directors in case of Company (Pvt) Ltd.

Desired City for Franchise: \_\_\_\_\_

### Data Verification (By Any Public Servant in BPS -17 or By Tehsil/ UC Chairman)

I solemnly affirm that the aforementioned particulars are true to the best of my knowledge.

Signature: 

--

 Official Stamp: 

--

CNIC# 

				-											-	
--	--	--	--	---	--	--	--	--	--	--	--	--	--	--	---	--

 Date: \_\_\_\_\_

- Important Documents:**  
Bank Draft of Rs.5000 drawn in favor of the  
**Air Foundation School System.**  
Original & Photocopy of the Franchise Application Form.  
Copy of Computerized CNIC.  
Bank Statement of Last 6 Months.

**Note:**  
Fee taken in lieu of application process is non-refundable.  
Mention the name of a city on the upper right corner of envelope  
for whom the application is submitted.  
One Franchise application is entertainable for each Desired City.

Applicant Signature  
& Thumb Impression 

--

### HEAD OFFICE ISLAMABAD

House No.12-C, Street No. 33, E-11/3, Islamabad - Pakistan. Tel: 051-9260881-2, Mob:0300-9543823

Business Helpline: 0304 11 11 909



**IPO - Pakistan**  
GOVERNMENT OF PAKISTAN  
[www.ipo.gov.pk](http://www.ipo.gov.pk)

