



PAKISTAN REVENUE AUTOMATION (PVT) LIMITED

PERSONAL INFORMATION FORM

NAME: _____

S/O: _____ DESIGNATION: _____

MARITAL STATUS: _____ CNIC: _____

DATE OF BIRTH: _____

OFFICIAL ADDRESS: _____

OFFICE TELEPHONE: _____ OFFICIAL EMAIL: _____

PERSONNEL EMAIL: _____

RESIDENTIAL ADDRESS: _____

MOBILE: _____ RESIDENTIAL TELEPHONE: _____

BANK NAME: _____ BRANCH: _____

IBAN NO. (24 DIGITS):

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BANK ADDRESS: _____

EMPLOYEE SIGNATURE: _____ DATE: _____

HUMAN RESOURCE DEPARTMENT