



**9. EMERGENCY NO**


**10. MOBILE NO**


**11. EMAIL**


**12. QUALIFICATION (START WITH HIGHEST QUALIFICATION)**

Degree/ Certificate	Passing Year	Marks Obtained / Total Marks	Division	Grade	Major Subjects	Board / University

**13. COMPUTER LITERACY (IF ANY)**

Course / Certificate / Diploma	Duration	Year	Institution

**14. EXPERIENCE (IF ANY)**

Position	From-To	Total Period of Service	Departmental Field of Work	Organization

**15. Declaration:**

**I do hereby declare that the information given above is correct to the best of my Knowledge & belief. I do hereby agree that I will strictly follow all the instructions given to me by officials of Balochistan Police related to the internship program. In case of any concealment of information / any violation instructions / any non-compliance of instructions, I will be liable to be disqualified from the internship program.**

**Applicants Signature: \_\_\_\_\_**

**Please attach the following:**

- i. Attested Copy of last semester's transcript.**
  - ii. Two Copy of CNIC.**
  - iii. Two (2) Passport size photographs.**
  - iv. Resume (CV - Curriculum vitae).**
  - v. Recommendation letter from Educational Institution.**
  - vi. Write up of 300 – 500 words on "My Opinion About Balochistan Police."**
-



# **INTERNSHIP IN BALOCHISTAN POLICE**

## **FORM-2**

### **CONFIDENTIALITY AND WAIVER FORM**

#### **APPLICANT STATEMENT OF CONFIDENTIALITY AND WAIVER**

I understand that any material omissions and/or false information I record on the application will be sufficient reason for rejection of this application or termination of my intern status. In addition, I authorize and request former employees, schools, individual agencies, organizations, or law enforcement agencies, to answer any and all questions about my past and current activities, about my attitude, behavior and beliefs that may be asked by officers of the Police Department in conjunction with the background investigation for internship. I do hereby withhold such persons harmless for giving of this information based on their knowledge and/or recollection.

I understand that I do not have the right to continue my internship status or possess appeal rights as an Intern if terminated.

I understand that I am not an employee of the Balochistan Police or any department thereof.

I understand and agree that in the performance of my duties as an Intern with the Balochistan Police Department, I will hold all names and information regarding the Department in the strictest confidence including observations made from street patrol, assisting the Investigation Division, or heard while participating in the internship program.

I understand that disclosure of confidential information to unauthorized sources may result in termination of my duties and responsibilities as an Intern.

I understand that Police Officers are by nature of their profession under constant threat of harm and danger. I understand that there are times during my internship that I may also be under this same threat by nature of being in a Balochistan Police vehicle and/or in close proximity to a Balochistan Police Officer.

Being made aware of the potential for threatening, dangerous circumstances during my internship experience, I \_\_\_\_\_ son/daughter of \_\_\_\_\_, do release the Government of Balochistan, the Balochistan Police Department, Balochistan Police Officers and Balochistan Police Department employees from all liability and responsibility of me during my internship hours with the department. This includes any action that may result from any accident, injury or other liability incurred or suffered by me while in my capacity as an intern with the Balochistan Police Department.

Intern Signature: \_\_\_\_\_

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

---