






		<b>SIBA TESTING SERVICES</b> Merit – Transparency – Technology	
<b>Candidate Copy</b> <b>IBA Community Colleges &amp; Schools</b>			
Branch Code: _____		Date: _____	
Branch Name: _____			
	<b>Allied Bank Limited</b>	<input type="checkbox"/>	
A/C Title:	SIBA TESTING SERVICES		
A/C #:	1203-00100-4907216-0015		
	<b>MCB Bank Limited</b>	<input type="checkbox"/>	
A/C Title:	SIBA TESTING SERVICES		
A/C #:	1853 – 1159209-46100-0280		
Bar Code & Reference #	 8 7 8 9 6 5 6 6 9 4 6 6 3		
Last Date of Fees Submission	March 20, 2020		
Deposit ID	IBAC0107		
Mr./Ms.			
S/d/w/o			
CNIC #			
Post Applied for			
<b>Total Fee</b>	<b>Amount in words:</b>		
<b>1000/-</b>	<b>Rupee(s): One Thousand Only</b>		
	Non-Refundable / Non-Transferable		
Applicant Signature	Cashier	Officer	

		<b>SIBA TESTING SERVICES</b> Merit – Transparency – Technology	
<b>STS Copy (to be attached with form)</b> <b>IBA Community Colleges &amp; Schools</b>			
Branch Code: _____		Date: _____	
Branch Name: _____			
	<b>Allied Bank Limited</b>	<input type="checkbox"/>	
A/C Title:	SIBA TESTING SERVICES		
A/C #:	1203-00100-4907216-0015		
	<b>MCB Bank Limited</b>	<input type="checkbox"/>	
A/C Title:	SIBA TESTING SERVICES		
A/C #:	1853 – 1159209-46100-0280		
Bar Code & Reference #	 8 7 8 9 6 5 6 6 9 4 6 6 3		
Last Date of Fees Submission	March 20, 2020		
Deposit ID	IBAC0107		
Mr./Ms.			
S/d/w/o			
CNIC #			
Post Applied for			
<b>Total Fee</b>	<b>Amount in words:</b>		
<b>1000/-</b>	<b>Rupee(s): One Thousand Only</b>		
	Non-Refundable / Non-Transferable		
Applicant Signature	Cashier	Officer	

		<b>SIBA TESTING SERVICES</b> Merit – Transparency – Technology	
<b>Bank Copy</b> <b>IBA Community Colleges &amp; Schools</b>			
Branch Code: _____		Date: _____	
Branch Name: _____			
	<b>Allied Bank Limited</b>	<input type="checkbox"/>	
A/C Title:	SIBA TESTING SERVICES		
A/C #:	1203-00100-4907216-0015		
	<b>MCB Bank Limited</b>	<input type="checkbox"/>	
A/C Title:	SIBA TESTING SERVICES		
A/C #:	1853-115920946-1000280		
Bar Code & Reference #	 8 7 8 9 6 5 6 6 9 4 6 6 3		
Last Date of Fees Submission	March 20, 2020		
Deposit ID	IBAC0107		
Mr./Ms.			
S/d/w/o			
CNIC #			
Post Applied for			
<b>Total Fee</b>	<b>Amount in words:</b>		
<b>1000/-</b>	<b>Rupee(s): One Thousand Only</b>		
	Non-Refundable / Non-Transferable		
Applicant Signature	Cashier	Officer	