Registration Form for Computerization/Automation
Supreme Court of AJ&K

PHOTOGRAPH

Two Pictures

Passport Size

PLEASE FILL IN BLOCK LETTERS

Name

Father Name

CNIC **Mobile**

Date of birth **Domicile**

Email (If any)

State Subject

Yes ☐ **No** ☐ **(**Please tick ☑**)**

Qualifications (Please tick ☑ the relevant box below**)**

BA	☐	**LLB**	☐	**LLM**	☐	**Bar–at–Law**	☐
MA	☐	**PHD**	☐	Others Qualification (if any) :			

Residential Address

_____

Office Address

_____

Lower Courts Pleadership Certificate/Licence No.

Date of issuance

High Court Licence No.

Date of issuance

AJK Bar Council Licence No.

Date of issuance

Supreme Court of AJK Enrollment Certificate/ Licence No.

Date of issuance

Member of Bar Association (Present) _____

_____

Signature of Applicant

_____

Dated

(Note): In case of change in any of above particulars, please intimate the office.