



HUNARMAND WELFARE

ORGANIZATION[®]

Photo here

(Supporting Document: Two Passport Size Photograph, Copy Cnic)

VISION

Our vision is that God has gifted a lot of aptitude to every Living soul. Through, which he can do a lot for himself And other. We want to help him by himself.

MISSION

Our mission is to serve our society in best possible way To educate our people, To feed them & To make them Mentally fit and happy are our secondary priorities

PERSONAL INFORMATION

NAME: _____

S/O,D/O,W/O: _____ BLOOD GROUP: _____

DATE OF BIRTH: _____ CNIC: _____

NATIONALITY: _____ GENDER: MALE FEMALE

RELIGION: _____ MARITAL STATUS: SINGLE MARRIED

OCCUPATION: STUDENT JOB BUSSINESS OTHER _____

WORKING IN OTHER NGO(SPECIFY) _____

CONTACT INFORMATION

CURRENT ADDRESS: _____

PERMENANT ADDRESS: _____

PHONE NO: _____ E-MAIL: _____

QUALIFICATION

ACADEMIC: _____

PROFESSIONAL: _____

HEAD OFFICE ADDRESS: R-21, BLOCK 10, GULSHAN E IQBAL, KARACHI

CALL: [03002042331](tel:03002042331) , [03162129038](tel:03162129038)

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