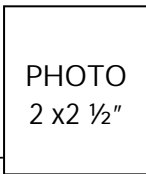


PARTICULARS OF SHARIAH ADVISORS TO BE SUBMITTED BY THE BANK

1. Full name: _____
 2. Father's name: _____
 3. Date of Birth (dd/mm/yyyy): _____ Place of Birth: _____
 4. Religion: _____ Nationality(ies): _____
 5. C.N.I.C. Number: _____ N.T.N. _____
 6. Present residential address in full: _____



7. Permanent residential address in full: _____

8. Present job/Status: _____

Institution/ Official address: _____

9. Contact Details:

Residential Phone No. _____ Office Phone No. _____

Mobile Phone No. _____ E-mail: _____

10. Education:

a) Details of *Shahadat-ul-Aalmial* Post Graduate Degree:

S. No.	Degree Name	Board/University	Date of passing	Percentage Marks	Grade

b) Major Subjects studied in Bachelors/Masters degree:

- i) _____
- ii) _____
- iii) _____
- iv) _____

c) Courses/ Trainings attended related to Banking and Finance, if any:

- i) _____
- ii) _____
- iii) _____

d) Language Skills in English and Arabic (Excellent/Good/Fair/Poor)

Proficiency in	English	Arabic
<i>Writing</i>		
<i>Reading</i>		
<i>Speaking</i>		

- e) Courses/ Certifications in English/ Arabic, if any:
 i) _____
 ii) _____
 iii) _____
- f) Computer Knowledge (Courses/ certifications or skills acquired)
 i) _____
 ii) _____
 ii) _____

11. Experience/Appointments/Positions held during the last five years:

a) Fatwa Experience:

- i) Experience of giving Shariah rulings:

S.No.	Name of Institution	Field(s) of Fatwa	From (dd/mm/yyyy)	To (dd/mm/yyyy)

- ii) No. of Fatawa Issued

S.No.	Name of Institution	Field(s) of Fatwa	No. of Fatwas

- iii) No. of Fatawa Published

S.No.	Name of Publication	Subject	Publisher Name	Year of Publication

- b) Research Experience: _____ Years

- i) Total No. of Publications/Articles Published in Research Journals: _____

S.No.	Subject of Publication or Article	Name of Journal/ Magazine	Date of Publication

- ii) No. of Books Authored/Compiled: _____

S.No.	Name of book	Subject	Publisher Name	Year of Publication

- c) Teaching Experience:

S.No.	Name of Institution	Subjects and Books Taught	Level of Teaching (Under Graduation /Grad/ Post Grad)	From (dd/mm/yyyy)	To (dd/mm/yyyy)

12. Name(s) & designation(s) of the supervisor (one grade up) under whom Shariah advisor has served during the last five years:

S.No.	Name of Supervisor	Designation of Supervisor	Name of Institution

13. Has he ever been terminated or dismissed in the capacity of employee or director/chairman from any institution, firm or a company? Yes No

If yes, provide details in the following format:

S.No.	Year	Designation	Name of Institution	Reason of Termination/Dismissal

14. Has he ever been convicted of any offence? Yes No

If yes, provide details in the following format:

S.No.	Year	Nature of offence	Authority by whom convicted	Penalty/Sentence Imposed

15. Has he ever been censured and/or penalized by any financial/tax authority (local or foreign)? Yes No

If yes, provide details in the following format:

S.No.	Year	Nature of findings	Authority by whom penalized	Penalty Imposed

16. Has he ever been dismissed from employment? Yes No

If yes, provide details in the following format:

S.No.	Year	Employer by whom dismissed	Reason of Dismissal

17. Does he hold/has held any executive/non-executive position in any other financial institution? Yes No

If yes, provide details in the following format:

S.No.	Designation and Nature of position	Name of Financial Institution	From (dd/mm/yyyy)	To (dd/mm/yyyy)

18. Does he have any substantial interest (5% or above) in the business of Exchange Company, Member of Stock Exchange or Corporate Brokerage or is an employee of any of these entities?

Yes No

If having substantial interest, provide details in the following format:

S.No.	Name of Institution	Percentage Interest Held	From (dd/mm/yyyy)	To (dd/mm/yyyy)
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If employee of any of the aforementioned entities, provide details in the following format:

S.No.	Name of Institution	Designation	From (dd/mm/yyyy)	To (dd/mm/yyyy)
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19. Names & addresses of three respectable persons (not relatives) who have been closely acquainted with the Shariah Advisor during the last five years.

S.No.	Name	Address	Contact No.
1.			
2.			
3.			

Signature and Seal of Authorized Official of
Islamic Banking Institution (Name & Designation)

Signature of Shariah Advisor

* Use additional sheet if required