Form PBA-SA-02

ALPHABETICAL CODES OF BANKS / F.I.S TO BE USED IN FORM PBA-SA-03

ABHI	Abhi Microfinance Bank Limited
ABIB	Al Baraka Bank (Pakistan) Limited
ABL	Allied Bank Limited
APNA	APNA Micro Finance Bank Limited
ASA	Asa Microfinance Bank (Pakistan) Limited
ASK	Askari Bank Limited
BAH	Bank AL Habib Limited
BAF	Bank Alfalah Limited
MAKRAMAH	Bank Makramah Limited
BOC	Bank Of China
BIPL	BankIslami Pakistan Limited
CITI	Citibank N.A., Pakistan
DEUT	Deutsche Bank AG, Pakistan
DBIB	Dubai Islamic Bank Pakistan Limited
EASYPAISA	Easypaisa Bank Limited
EXIM BANK	Export Import Bank Of Pakistan
FBL	Faysal Bank Limited
FWB	First Women Bank Limited
HBL	Habib Bank Limited
HMBL	Habib Metropolitan Bank Limited
HALAN	Halan Microfinance Bank Limited
HBLMFB	Hbl Microfinance Bank Ltd
ICBC	Industrial and Commercial Bank of China Limited
JSBL	JS Bank Limited
KB	Khushhali microfinance bank ltd
LOLC	Lolc Microfinance Bank Ltd
MASHREQ	Mashreq Bank Pakistan Limited
MCB	MCB Bank Limited
MCB-ISLAMIC	MCB Islamic Bank Limited
MBL	Meezan Bank Limited
MOBILINK	Mobilink Microfinance Bank Limited
NBP	National Bank of Pakistan
NRSP	NRSP Microfinance Bank Limited
PAIR	PAIR Investment Company Limited
PBIC	Pak Brunei Investment Company Limited
PLHC	Pak Libya Holding Company (Pvt.) Limited
PMRC	Pak Mortgage Refinance Company Limited
POIC	Pak Oman Investment Company Limited
PCIC	Pak-China Joint Investment Company Limited
PKIC	Pakistan Kuwait Investment Company (Pvt.) Limited
RAQAMI	Raqami Islamic Digital Bank
SAMBA	Samba Bank Limited
SPIC	Saudi Pak Industrial & Agricultural Investment Company Limited
SINDHBANK	Sindh Bank Limited
SINDH MFB	Sindh Microfinance Bank Ltd
SBL	Soneri Bank Limited
SCBP	Standard Chartered Bank (Pakistan) Limited
BOK	The Bank of Khyber
BOP	The Bank of Punjab
PPCB	The Punjab Provincial Cooperative Bank Limited
UMBL	U Microfinance Bank Limited
UBL	United Bank Limited
ZTBL	Zarai Taraqiati Bank Limited

FORM PBA-SA-03

INITIAL PARTICULARS OF GUARDS/SUPERVISORS DEPLOYED IN THE BANKING INDUSTRY

Security Agency Name: _____ Page No. _____

Employee CNIC Number	Name	CT (G/S)	Police Verification	Current Posting Particulars			
				Bank Name	Branch Name	Br. Code	Posting Date (DD-MON-YEAR)

Note: CT means Category; G/S means Guard/Supervisor

PBA-SA-05

PARTICULARS & DOCUMENTS OF GUARDS / SUPERVISORS

FOR PBA RECORDS PURPOSES

EMPLOYER SECURITY AGENCY	
CNIC Number	
Name	
Father's Name	
Date of Birth	
Training Particulars (For Guards Training)	
Name of Training Institute	
Training Period (Specific dates: from - to)	
Name of Firing Range where last Firing Session Taken:	
Date of Firing Session:	
Medical Fitness Status	
Hospital / Clinic / Doctor Name	
Checkup Date	
Checkup Status (Fit / Unfit)	
Comments	
Attachments:	
CNIC Photocopy (both sides)	
Photograph (Not more than 6 months old)	
Signature & Stamp of Security Agency	
Name of Authorized Person	

PBA-SA-06

TRANSFERS & POSTINGS OF GUARDS / SUPERVISORS DURING THE MONTH

Security Agency: _____ Month: _____

CNIC Number	Name	Previous Posting Details			New Posting Details		
		Bank	Branch	Exit Date	Bank	Branch	Start Date

PBA-SA-07

COMPLETION OF TRAINING DURING THE YEAR

Security Agency: ____ Month: __________________

CNIC Number	Name & Address of Institute where Training undertaken	Start Date	End Date

PBA-SA-08

COMPLETION OF FIRING PRACTICE DURING THE YEAR

Security Agency:_____ Month:_____

CNIC Number	Name & Address of Firing Range where Practice undertaken	Date

PBA-SA-09

MEDICAL CHECK-UPS COMPLETED DURING THE YEAR

Security Agency:_____ Month: _____

CNIC Number	Name & Address of Hospital / Clinic / Doctor where Medical checkup undertaken	Date (DD-MON-YYYY)	Checkup Status (Fit / Unfit)

Note: For comments on checkup status use separate sheet(s).

PARTICULARS OF EX-SERVICEMEN (ARMED / PARA MILITARY FORCES) GUARDS / SUPERVISORS

EMPLOYER SECURITY AGENCY	
CNIC Number	
Name	
Joining Date	
Permanent Address	
Phone Numbers	
Residential Address	
Phone Numbers	
Name of 1st Reference	
CNIC Number	
Relationship	
Address	
Phone Number	
Name of 2nd Reference	
CNIC Number	
Relationship	
Address	
Phone Number	
Name of Armed Forces Unit Served	
Joining Date & Departure Date	
Attach copy of Retirement Card	
Last Employer (other than Armed Forces)	
Joining Date & Departure Date	
Attach Reference/Employment Certificate	

CONFIRMATION OF VERIFICATION OF CREDENTIALS

We hereby confirm that verification of the above particulars have been completed by us from concerned/ relevant departments/authorities/organizations/persons.

COMPANY AUTHORIZED SIGNATURE WITH COMPANY'S STAMP

Name of the Authroized Person_____ **Date** _____

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PARTICULARS OF GUARDS / SUPERVISORS FOR PBA RECORDS & VERIFICATION STATUS

EMPLOYER SECURITY AGENCY	
CNIC Number	
Name	
Joining Date	
Permanent Address	
Phone Numbers	
Residential Address	
Phone Numbers	
Name of 1st Reference	
CNIC Number	
Relationship	
Address	
Phone Number	
Name of 2nd Reference	
CNIC Number	
Relationship	
Address	
Phone Number	
Name of Last Employer	
Joining Date & Departure Date	
Attach Reference/Character Certificate	
VERIFICATION STATUS:	All credentials of guard must be verified before submission
CNIC	
PERMANENT ADDRESS & PHONE	
RESIDENTIAL ADDRESS & PHONE	
1ST REFERENCE	
2ND REFERENCE	
LAST EMPLOYMENT	
NAME OF AUTHORIZED PERSON	
COMPANY SIGNATURE & STAMP	