



PTPP Staff Service Rules (CSSR) Receipt and Acknowledgement

By signing this statement, I acknowledge that I have received a soft copy of the SOPs slides presented by Chip Training & Consulting (Pvt) Ltd in the SOPs Session. I also acknowledge that I have been oriented on PTPP SOPs and I am familiar with its contents and agree to abide by all the conditions of employment outlined therein.

Participant Name: _____ [Handwritten Signature] _____ Position: _____ [Handwritten: Ctw] _____

Signature: _____ [Handwritten Signature] _____ Date: _____ [Handwritten: 21/10/23] _____

CTC Official Use

CTC Focal Person : _____

CTC Facilitator: _____