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: [illegible] Position: CHW

Signature: [signature] Date: 20-10-23

CTC Official Use

CTC Focal Person : _____

CTC Facilitator: _____