

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:	Position: ZHW
Signature:	Date: $\frac{10 + 20/3 - 3}{3}$
CTC Official Use	
CTC Focal Person :	
CTC Facilitator:	