

## 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: BM ASIG	Position:
Signature: ADM	Date:
CTC Official Use	V
CTC Focal Person :	
CTC Facilitator:	*