

## 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: Name:	Position: CHM
Signature:	Date: 02/10/93
CTC Official Use	
CTC Focal Person :	
	*
CTC Facilitator:	