



# 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: Amna Position: C.H.W  
Signature: [Handwritten Signature] Date: 28-2-24  
Phone: 1730138413742

CTC Official Use

CTC Focal Person : [Handwritten Signature]  
CTC Facilitator: [Handwritten Signature]