

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: ZAHIRA BIBI
Position: CHW
Signature: [Handwritten Signature]
Date: 29/02/24

CTC Official Use

CTC Focal Person: _____

CTC Facilitator: _____