

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: Shahla
Signature: Shahla
Position: C-H.W
Date: 19-1-24
U.C. Achim Bada

CTC Official Use

CTC Focal Person : _____

CTC Facilitator: _____

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Participant Name: Nazreen-Zia. Position: C.H.W

Signature: [Handwritten Signature] Date: 22-1-24 Pishtrakhera.

CTC Official Use

CTC Focal Person : _____

CTC Facilitator: _____

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[Handwritten initials]

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Participant Name: Hussain Zubayr
Position: C.H.W
Signature: [Signature]
Date: 22/11/2025

CTC Official Use

CTC Focal Person : _____

CTC Facilitator: _____

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Sasibound

Participant Name: Idra Position: C. H. W

Signature: [Signature] Date: 22 Jan 2024

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CTC Focal Person : _____

CTC Facilitator: _____

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Participant Name: Nagish Position: C.H.W. Sarbada

Signature: [Signature] Date: 28/1/2024

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CTC Focal Person : _____

CTC Facilitator: _____

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Participant Name: Aiman Haidee Position: CHW (Parks Sub)
Parkha Shukla

Signature: *Aiman* Date: 22/01/2024

CTC Official Use

CTC Focal Person : _____

CTC Facilitator: _____

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Participant Name: Kainat Bibi
Position: C.H.W/Pakhaghul
Signature: Kainat Bibi
Date: 22/1/2024

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CTC Focal Person : _____

CTC Facilitator: _____

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Participant Name: Urooj Position: C.H.W

Signature: Urooj Date: 22-1-24

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CTC Facilitator: _____

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Grubela

Participant Name: Fatima Hassan Position: CHW

Signature: [Signature] Date: 22/11/2024

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CTC Facilitator: _____

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Participant Name: Bibi Azeg Position: ch.w

Signature: *(Signature)* Date: 22-1-24

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CTC Focal Person : _____

CTC Facilitator: _____

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UC (2015/17)

Participant Name: Zebunnisa Position: CHW

Signature:  Date: 22/1/24

CTC Official Use

CTC Focal Person: _____

CTC Facilitator: _____

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UC :- HK-1

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Participant Name: HUMAIRA NAYAB Position: CHW

Signature: [Signature] Date: 22-1-2024

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CTC Focal Person : _____

CTC Facilitator: _____

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Participant Name: HAYA KHAN Position: CHW

Signature:  Date: 22.1.2024

CTC Official Use
UC= Londi Arbab

CTC Focal Person : _____

CTC Facilitator: _____

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Participant Name: Sadaf
Position: CHW
Date: 21/8/24
Signature: Sadaf

CTC Official Use
CTC Focal Person: [Signature]
CTC Facilitator: [Signature]

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Participant Name: Rimsdra
Position: AS
Signature: [Signature]
Date: 21/3/24

CTC Official Use
CTC Focal Person: [Signature]
CTC Facilitator: [Signature]

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Yakobov - 2

I, the undersigned, in this statement, I acknowledge that I have received the SOPs documents prepared 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: NABILA
Position: CHW
Signature: [Handwritten Signature]
Date: 8-12-23

CTC Official Use

CTC Focal Person:

In signing this statement, I acknowledge that I have received the SOPs documents 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. I agree to abide by all the conditions of employment outlined therein.

Signature: Mr. Maham Position: CHW

Date: 8.12.23

CTC Official Use

Person

Person

Deh Baran

By signing this statement, I acknowledge that I have received the SOPs documents 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: Samina Position: CHW
Signature: [Signature] Date: 8.12.2023

CTC Official Use

CTC Focal Person: _____

CTC Facilitator: _____

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Participant Name: Ram
Position: C.H.W
Signature: [Signature]
Date: 8/12/2023

CTC Official Use

CTC Focal Person: _____

CTC Facilitator: _____

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by Chip Training & Consulting (Pvt) Ltd in the SOPs session. I also
state that I have been oriented on PT/PP SOPs and I am familiar with its contents
as well as by all the conditions of employment outlined therein.

Date: 7-Dec-2023

Position: CHW

CTC Official Use

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I hereby acknowledge that I have received the SOPS documents prepared by Ship Training & Consulting (Pvt) Ltd in the SOPS Session. I also acknowledge that I have been oriented on ETR/SOPS and I am familiar with its contents and agree to abide by all the conditions of employment outlined therein.

Employee Name: SAIVA

Position: C.H.W

Signature: SAIVA

Date: 7/10/23

ETC Official Use