TLANTIA

CTC Focal Person: _

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.

Name: farling CNIC: S4301-39476764

Position: C-H-W UC: K939 Villy

Signature: Farling Date: 14-5-074

CTC Official Use

CTC Facilitator: _





