



## 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: Mahrugh

CNIC: 54401-5862818-4

Position: CHW

UC: W-12

Signature: Mahrugh

Date: 22-May-24

### CTC Official Use

CTC Focal Person: \_\_\_\_\_

CTC Facilitator: \_\_\_\_\_