

TRAINING &
CONSULTING

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: Abdul Ahad

CNIC: 5430503568153

Position: Area supervisor

UC: Ibrahimzai

Signature: S. A. 7-

Date: 25-06-24

CTC Official Use

CTC Focal Person: _____

CTC Facilitator: _____