

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: Mugaelaus	CNIC: <u>54400-302761</u> 3-8
Position: CHW	uc: <u>Qambeani</u>
Signature: Ny	Date: $\frac{5 \left 9 \right 2024}{}$
CTC Official Use	
CTC Focal Person:	CTC Facilitator:

