PTPP Staff Service Rules (CSSR)

Receipt and Acknowledgement

TRAINING & CONSULTING

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: Schrish	CNIC: <u>S4400-484163</u> 9-8
Position:	UC: Pads: Abach
Signature: Sandy	Date: 5/NOV BODY
CTC Official Use	
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CTC Focal Person:	CTC Facilitator: