

**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: Samina

CNIC: 54400-88669432

Position: AS

UC: BB

Signature: Samina

Date: 6.11.24

CTC Official Use

CTC Focal Person: _____

CTC Facilitator: _____