

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: Sadia

CNIC: 5430223081430

Position: Chw

UC: K-T-2

Signature: [Signature]

Date: 2-12-2024

CTC Official Use

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

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