

[CTC – HRO – PTPP – Recruitment & Selection – 7.8.5-c-061] [Insurance Nomination form– June 2024]

TRAINING & CONSULTING	ICTC - HRO - PTPP - Recruitment & Selection - 7.8.5-	c-061]
	[Insurance Nomination form- June 2024]	
Form of No	mination for Death Insurance for CTC Emplo	
I_Rafig	and the mance for CIC Emplo	yees
	s/d/w/o Mex Gul	bearing
CIVIC# 21)03 70	14/1971114	bearing
nominate the person/ per	sons mentioned below who is/ are member(s) death insurance amount (sum assured) in the	hereby
beneficiary (les) to receive the	death insurance amount (sum assured) in the even	of my family as
	(First choice)	. or my death.
Name of Nominee/	1 111	
Nominees	Relationship Specification of Share C	Contact Number
Mer Gul	Jather 500	
Khan Shayif	50% 033	3-0301163
Khan Shayif	Brelher 50%	24552-11
	1033	34553061
, (I	n case of death of first choice) – 2 nd Option	
Name of Nominee/	UD II	• '
Nominees	Relationship Specification of Share Cor	ntact Number
20	100 m	
Ner Gul	Father 50% 0333	0301163
Thereby could be		3 1103
me.	noted member(s) of my family mentioned are wholl	· .
, , , , , , , , , , , , , , , , , , ,	The state of the s	y dependent upon
The earlier nomination made b	Wime (if any) may kin di	wi
	y me (if any) may kindly be treated as cancelled and	of no effect
:		# **
DATED	SICNIATIVE	
DATED:	SIGNATURE OR THUMB IM	PRESSION OF
16/9/2024	THE EMPLOYE	E
	رفيق	