

Application for Employment with CTC



Instructions

- Read the whole form carefully before starting to fill it in.
- This form should be completed in ink, in candidate's own handwriting.
- Attach copies (not originals) of all testimonials and certificates. A copy of CV and CNIC is mandatory.
- If space provided in the form for any particular information is inadequate, please attach additional sheets.
- If any information is given in this form is subsequently found to be incorrect, it will be construed as a gross misconduct, liable to be punished by instant dismissal and other disciplinary action as may be appropriate to the nature of misstatement.

(For official use only to be filled by CTC Staff) (سی آئی سی عارف کی جانب سے پُر جائے گا)

عہدہ کا نام جس کے لئے درخواست دی گئی: (Position applied for)
منتخب ہونے پر تعیناتی تربیت کی متوقع تاریخ: (سال/رمہیزہ/دن)
(Expected Date of Induction Training if selected)

(Personal Information) ذاتی معلومات 1-	
Ali Hasn Aslam	1.1 مکمل نام (Full Name)
34302-5498975-9	1.2 شناختی کارڈ کا نمبر (CNIC No.)
	1.3 دیگر شناختی نمبر (شناختی کارڈ میسر نہ ہونے کی صورت میں) (Other Identification number if CNIC is not available)
06-08-2002	1.4 تاریخ پیدائش (سال/رمہیزہ/دن) (Date of Birth (YYYY/MM/DD))
<input type="checkbox"/> تاریخ پیدائش معلوم نہیں (DOB not Mentioned) <input type="checkbox"/> صرف سال معلوم ہے (Only Year available) <input checked="" type="checkbox"/> دن، ماہ، سال معلوم ہے (Day, Month, Year Available)	1.4.1 تاریخ پیدائش کا جائزہ لیں (کسی ایک پر نشان لگائیں) (Check DOB) (Tick any One)
Muhammad Aslam	1.5 والد شوہر/خوئی رشتہ دار کا نام (Father's/Husband Name/ Name of i.e. Next Kin)
Father	1.6 امیدوار کے ساتھ رشتہ (Relationship with Applicant)
Married	1.7 ازدواجی حیثیت (Marital Status) صنف (Gender) قبیلہ (Tribe) ذات (Ethnicity) زبان (Language)
Male	
Gujari	
Urdu - Punjabi	
Bhoon Fazal-PO-SPB-Teh. Pindi Bhatta - Hafizabad	1.8 مکمل پتہ (Permanent Address)
Hafizabad	ضلع یا یونین کونسل (District and Union Council)
Bhoon Fazal - Hafizabad	1.9 موجودہ پتہ (Present Address)
(Residence) رہائش 0323-7487116 (Mobile) موبائل	2.0 رابطہ کی تفصیل (Contact Detail)
(E-mail) ای میل Ms.Alihasnab40@gmail.com, (Office) دفتر	2.1 آخری تعلیمی سند (Last Qualification)
Intermediate	

2- تعلیمی قابلیت (Qualification)

(List all your academic and technical qualifications, starting with school certificate (Matriculation))

تمام تعلیمی و فنی قابلیت کی اسناد کی فہرست لکھیں (میٹرک سے شروع کریں)

گریڈ/ڈویژن (Grade/Division)	اہم مضامین (Major Subjects)	سرٹیفکیٹ حاصل کردہ ڈگری (Certificate/ Degree Obtained)	ادارہ (Institution)	سال (Year)
A	SCIENCE	Matric	Govt school JPB	2017
C	Arts	Intermediate	Govt college JPB	2019

3- موجودہ ملازمت (Present Employment)

(Give details of your present employment. (If you are currently unemployed, give these details in respect of the last employment held by you).)

اگر آپ فی الحال بے روزگار ہیں، تو گزشتہ ملازمت کی تفصیلات فراہم کریں

Ali Hasan Aslam	(Name of Employer)	آزرا کا نام	3.1
Bhoom Faral-Jalalpur Bhattian, Dist- Hafizabad	(Employer's Address)	آزرا کا مکمل پتہ	3.2
15-08-2023	(Date of Joining)	تاریخ تیسرے	3.3
CTC - SW	(Your Last Job Title)	آخری عہدہ	3.4
Safety checking	(Main Duties)	اہم ذمہ داریاں	3.5
Ibrahim Hussain	(Name & Title of your Immediate Boss)	مجاز آفیسر کا نام اور عہدہ	3.6
34000/-	(Gross Monthly Pay)	مجموعی ماہانہ عہدہ (روپے میں)	3.7

4- سابقہ کام کا تجربہ (Past Work Experience)

(List all the previous jobs held by you, starting from the earliest).

آپ کی تمام سابقہ ملازمتوں کی فہرست کی تفصیل، آخری ملازمت سے شروع کریں

اہم ذمہ داریاں (Main duties performed by you)	عہدہ آخری عہدہ جب ملازمت چھوڑی (Position held by you when you left this employer)	آزرا کا نام اور پتہ (Employer's Name & Address)	دورانیہ دن - عہدہ - سال تا دن - عہدہ - سال (From/To) (D/M/Y to D/M/Y)
Shift incharge and forest safety	Forest manager and cashier	Ali Hasan Aslam Bhoom Faral - Jalalpur Bhattian	07-09-2018 17-06-2020

5-حوالہ جات (References)

آپ کو از کم تین (3) حوالہ جات دیں، جن کا تعلق آپ کے کسی خونی یا شادی سے ہر سے رہنے سے نہیں ہو بلکہ جو آپ کے کردار اور کام کے تجربے سے واقف ہوں۔
Give details of 3 references, not related to you by blood or marriage, who can vouch for your character and work experience

5.1	پہلا حوالہ First Referee	کامل نام (Full Name)	Muhammad Yousaf
		کامل پتہ (Full Address)	Bhoon Fazal P/O Jallalpur Bhattian, HFD
		رابطہ نمبر (Contact Number)	0320-7534835
		آپ کے ساتھ کام کی نوعیت (Nature of association with you)	
5.2	دوسرا حوالہ Second Referee	کامل نام (Full Name)	Muhammad Awaiz
		کامل پتہ (Full Address)	Village Bhoon Fazal - P/O Jallalpur Bhattian - HFD
		رابطہ نمبر (Contact Number)	0304-6920402
		آپ کے ساتھ کام کی نوعیت (Nature of association with you)	
5.3	تیسرا حوالہ Third Referee	کامل نام (Full Name)	Asif Thangit
		کامل پتہ (Full Address)	Chak No 445B, Teh. Chak Thumra - Faisalabad
		رابطہ نمبر (Contact Number)	0345-4072423
		آپ کے ساتھ کام کی نوعیت (Nature of association with you)	

6-عمومی معلومات (General Information)

6.1	کیا آپ کو کوئی معذوری یا بیماری تو نہیں ہے، اگر ہاں تو تفصیل بتائیں Do you suffer from any serious ailment or disability? If so, give details.	No
6.2	کیا آپ کبھی کسی کام کے سلسلے میں مجرم تو قرار نہیں پائے، اگر ہاں تو تفصیل بتائیں Have you ever been tried or convicted for any crime? If so, give full details.	No
6.3	آپ کے خیال میں درخواست سے متعلق کوئی ایسی معلومات جو اس فارم میں موجود نہیں آپ ہمیں بتا سکتے ہیں۔ Give any other information not covered by this form which in your opinion is relevant to your application	No
6.4	اگر ہم آپ کو پے ادوارے میں کام کرنے کے لئے بلائیں، آپ کتنے عرصہ میں ہمارے ساتھ کام کر سکتے ہیں؟ If an offer is made to you, how soon can you join to us?	on Demand
6.5	آپ کی متوقع تنخواہ اور دیگر فوائد کی کیا امید رکھتے ہیں؟ What are your salary and benefits expectations?	

7-عہدہ کی موزونیت (Suitability to the Position)

(Briefly explain why you consider yourself suitable for the position you have applied for).

آپ کے خیال میں آپ کیوں اس عہدہ کے لئے زیادہ موزوں ہیں؟

درخواست گزار کا حلف نامہ

میں تصدیق کرتا/کرتی ہوں کہ اوپر دی گئی تمام معلومات میرے علم اور یقین کے عین مطابق ہیں، درست اور مکمل ہیں، بعد میں کسی بھی معلومات کے غلط ہونے کی صورت میں تادیبی کارروائی کی ذمہ داری قبول کرتا/کرتی ہوں۔
I confirm and certify that the information given above is true, correct and complete to the best of my knowledge and belief. I accept responsibility for any misstatement that be subsequently discovered.



امیدوار کے دستخط
(Candidate's Signature)

21-12-23 تاریخ (Date)



CHIP Training & Consulting (Pvt). Ltd
Declaration Form of Candidate for Residential Address
(To be filled & signed by Candidate)

Name of Candidate as per CNIC:	Ali Hasan Aslam	
S/D/W of;	Muhammad Aslam	
CNIC NO:	3 4 3 0 2 5 4 9 8 9 7 5 9	
Position Applied:		
Permanent address as per CNIC:	House No:	02
	Street #:	1
	Mohallah:	Bhoun Faral
	Village:	Bhoun Faral
	Sector/UC:	Jalalpur Bhattian
	Town /Tehsil:	Pindi Bhattian
	District	Hafizabad
Current Residential Address: <i>(Kindly don't fill this section if permanent and residential addresses are same)</i>	House No:	02
	Street#	1
	Mohallah:	Bhoun Faral
	Village:	Bhoun Faral
	Sector/UC	Jalalpur Bhattian
	Town /Tehsil:	Pindi Bhattian
	District	Hafiz abad
Signature & Date:	Date of Form Filling:	Signature of Applicant:
	21-12-23	

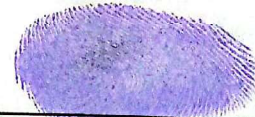


Bank Account Information	
Name of Employee	Ali Hasan Aslam
Designation	Safety Warden
Union Council / Area	Jallalpur Bhattian
District / Agency	Hasizabad
Contact No.	0323-7487116
CNIC No.	34302-5498975-9

Bank Account Title	Ali Hasan Aslam
Bank Name	Easy Paisa
Bank Address	EasyPaisa digital application
Bank Branch Code	
Bank Account Number (With IBAN)	0323-7487116 - PK38TMFB0000000071769856

I will be responsible for the results occurring due to any mistake/error in the above information and there will be no liability on Chip Training and Consulting Pvt. Ltd for any dues/funds payable to me.

Employee Signature
(Mandatory)



Employee Thumb Impression
(Mandatory)

Dated: 21-12-23

Note:

Employee will provide the bank account maintenance certificate with this letter for next salary processing.



[CTC - HRO - PTPP - Recruitment & Selection - 7.8.5-c-037]
[Field Joining Form - Jan 2020]

CHIP TRAINING & CONSULTING

JOINING REPORT BY A NEW EMPLOYEE

Name of the Employee	Ali Hosan Aslam
Position appointed to	Safety Warden
Department and/or Location of appointment	Faisalabad
CNIC#	34302-5498975-9
CNIC Expiry Date	18-10-2031
Date of Joining	15-08-2023
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	



DECLARATION FORM

(TO BE FILLED BY THE EMPLOYEE)

I Ali Hasan Aslam....., S/D/W/O M. Aslam....., holding CNIC 3030254989759 Resident of Bhawan Fazaal Jallal P.S. Bhattian Jallal P.S. Bhattian Tehsil Pindi Bhattian District Hafizabad Employee for the position of Safety warden..... With CHIP Training & Consulting (Pvt) Ltd under its third party contract for PTPP Project, do hereby declare as under:


1. That, I have not enrolled myself in any program in any college/university which comes under the category of regular studies and that currently I am not taking any regular classes.
2. That, I am not employed by any government department or private organizations neither have I any private business registered in my name nor am active partner in family business.
3. I shall be bound to declare - during the course of my employment - any of the above mentioned scenarios.
4. If found making a false or misleading statement when applying for this position with the company, I will be liable to instant dismissal, without benefits, on discovery of such falsehood or misrepresentation.

The following are the details of my regular studies or dual job, if any:

Name	Regular Student Of	Department/ Institute Name	Working as employee with (Govt/Private)	Department/ Organization name	Private business, if any	Any other part time job

Declaration: I do hereby solemnly affirm and declare that the information provided above is true and correct and nothing has been concealed therein.

Signature


Date: 21-12-23



Disclosure of Relationship Form

(To be filled by Candidate)

I Ali Hasan Aslam, S/D/W/O M. Aslam, Holding CNIC 34302-54989759, Resident of Pakistan - Bham Fozal - Jallah Par Bhattian
UC Jallah Par Bhattian Tehsil Pindi Bhattian, District Hafizabad
Candidate for the position of Safety Warden with CHIP Training & Consulting (Pvt.) Ltd. under its third party contract for PTPP project, do hereby declare as under:

1. That none of my blood/close relations which may include inter alia parents, brother, sister, husband, wife, spouse, children, maternal and paternal uncle, aunt, niece, nephew, brother/father/mother/sister-law or any other relationship which could come into the standard definition of "blood/close relation" is employed under PTPP project in the same district or PTPP or CTC offices in the same province where I am candidate for this position.
2. That, if selected for this position, I shall be bound to declare - during the course of my employment - any of my above said relationship if the same joins PTPP, CTC or/and WHO to CTC at the earliest.
3. The following blood/close relations (as mentioned in article 01 above) are employed within PTPP CTC or WHO as of the date mentioned below:

Name	Designation	Organization	Province/District	UC	Relationship

Declaration; I do hereby solemnly affirm and declare that the information provided above is true and correct and nothing has been concealed therein.

Signature:

Date: 21-12-23



CHIP Training & Consulting (Pvt) Ltd			
Human Resource Department			
Documents Check List			
Designation			
Name of Employee	Ali Hasan Aslam	Focal Person for file management	
Area/ Site	Dar-ul-Abzan F/S	CNIC No	34302-5498975-9
Date of Joining	15-08-23	Resignation/ Termination Date	

S No:	Documents	If Received (✓)	Remarks (If Any)
1	Academic Credentials (verified by HEC)		
2	Experience Certificates		
3	Resume	✓	
4	Employment Form		
5	Kinship Form		
6	Physical Verification Form		
7	Education and Dual Job Verification form		
8	Bank Detail Form	✓	
9	Contract Letter In Hard Copy		
10	Security Clearance Form (If Applicable)		
11	Copy Of CNIC	✓	
12	Passport size Photograph	✓	
13	Sops Acknowledgement Form		
14	Joining Form		

CTC Focal Person

Date

CTC HR Associate

Date