

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.



صرف دفتر میں استعمال کے لئے (سی آئی سی سٹاف کی جانب سے مہر لگانے کے لئے) (For official use only to be filled by CTC Staff)

Safety Warden (Position applied for) عہدہ کا نام جس کے لئے درخواست دی گئی: _____
14-8-2023 (Expected Date of Induction Training if selected) منتخب ہونے پر تعیناتی تربیت کی متوقع تاریخ: (سال/مہینہ/دن) _____

1- ذاتی معلومات (Personal Information)

Muzakar Hanif	(Full Name) مکمل نام	1.1
34104-3741454-3	(CNIC No.) شناختی کارڈ کا نمبر	1.2
	دیگر شناختی نمبر (شناختی کارڈ بصر نہ ہونے کی صورت میں) (Other Identification number if CNIC is not available)	1.3
2000-02-08	(Date of Birth) تاریخ پیدائش (سال/مہینہ/دن) (YYYY/MM/DD)	1.4
<input type="checkbox"/> تاریخ پیدائش معلوم نہیں ہے (DOB not Mentioned)	<input checked="" type="checkbox"/> دن/مہینہ/سال معلوم ہے (Day, Month, Year Available)	1.4.1
M. Hanif Ahsan	(Father's/Husband Name/ Name of i.e. Next Kin) والد/شوہر/رشتہ دار کا نام	1.5
Father	(Relationship with Applicant) امیدوار کے ساتھ رشتہ	1.6
Married	(Marital Status) ازدواجی حیثیت	1.7
Male	(Gender) صنف	
Islam	(Tribe) قبیلہ	
Rajpoot	(Ethnicity) ذات	
Urdu & Punjabi	(Language) زبان	
VPO Gunian wala Wajirabad	(Permanent Address) مکمل پتہ	1.8
Dist. Gujranwala UCMansoor wali	(District and Union Council) ضلع یا یونین کونسل	
	(Present Address) موجودہ پتہ	1.9
03440346368 (Mobile) موبائل نمبر	(Contact Detail) رابطہ کی تفصیل	2.0
Rana Sma 6368@gmail.com (E-mail) ای میل	(Office) دفتر	
Ba	(Last Qualification) آخری تعلیمی سند	2.1

2- تعلیمی قابلیت (Qualification)

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

تمام تعلیمی و تکنیکی 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)
First Second Third		Matric FA BA	Bise Punjab College Uop	2014 2016 2018

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

(Name of Employer)	آجر کا نام	3.1
(Employer's Address)	آجر کا مکمل پتہ	3.2
(Date of Joining)	تاریخ تیسرے	3.3
(Your Last Job Title)	آخری عہدہ	3.4
(Main Duties)	اہم ذمہ داریاں	3.5
(Name & Title of your Immediate Boss)	مجاز آفیسر کا نام اور عہدہ	3.6
(Gross Monthly Pay)	مجوزی 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)	آجر کا نام اور پتہ (Employer's Name & Address)	دورانیہ دن۔ مہینہ۔ سال تا دن۔ مہینہ۔ سال (From/To) (D/M/Y to D/M/Y)
Team management	Supervisor	Aurat foundation	01-01-2018/1-1-2019
Uc & Mnro	Ucm&ro	T-K-F	22-2019/9-9-2020
S-M	Social mobilizer	I-R-C	4-2-2020/10-2-2022

5-حوالہ جات (References)

آپ کو لازم کم (۳) حوالہ جات دیں، جن کا تعلق آپ کے کسی کوئی باضابطہ سے جڑے رشتہ سے نہ ہو، بلکہ جو آپ کے کاروبار کام کے تجربے سے واقف ہو۔
Give details of 3 references, not related to you by blood or marriage, who can vouch for your character and work experience.

M. Hanif Ahsan VPO Gunian wala Wazirabad 0326-0346368 Father	(Full Name) مکمل نام (Full Address) مکمل پتہ (Contact Number) رابطہ نمبر (Nature of association with you) آپ کے ساتھ کام کی نوعیت	پہلا حوالہ First Referee	5.1
Tameez Ahsan VPO Gunian wala Wazirabad 0326-0346368 Mother	(Full Address) مکمل نام (Full Address) مکمل پتہ (Contact Number) رابطہ نمبر (Nature of association with you) آپ کے ساتھ کام کی نوعیت	دوسرا حوالہ Second Referee	5.2
Aliya Mujakar VPO Gunian wala Wazirabad 0370-0346368 Wife	(Full Name) مکمل نام (Full Address) مکمل پتہ (Contact Number) رابطہ نمبر (Nature of association with you) آپ کے ساتھ کام کی نوعیت	تیسرا حوالہ Third Referee	5.3

6-عمومی معلومات (General Information)

NO	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 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.
ALL time	6.4 اگر ہم آپ کو پونے اوارے میں کام کرنے کے لئے بلائیں، آپ کتنے عرصے میں ہمارے ساتھ کام کر سکتے ہیں؟ If an offer is made to you, how soon can you join to us?
50 Ha jax	6.5 آپ کی حق توقع تنخواہ اور دیگر فوائذ کی کیا امید رکھتے ہیں؟ What are your salary and benefits expectations?

7-عہدہ کی موزونیت (Suitability to the Position)

آپ کے خیال میں آپ کیوں اس عہدہ کے لئے زیادہ موزوں ہیں؟
(Briefly explain why you consider yourself suitable for the position you have applied for).

Because this is my am in live I want to serve humanity.

درخواست گزار کا حلف نامہ

میں تصدیق کرتا کرتی ہوں کہ اوپر دی گئی تمام معلومات میرے علم اور یقین کے بین مطابق ہیں، درست اور مکمل ہیں، بعد میں کسی بھی معلومات کے نفاذ ہونے کی صورت میں تازہ بی کاروائی 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)

20-12-2023 تاریخ (Date)



DECLARATION FORM

(TO BE FILLED BY THE EMPLOYEE)

I Muzakar Hanif.....S/D/W/O M-Hanif Ahsan....., holding CNIC 34104-3741654-3 Resident of VPO-Gunian wala Wazirabad UC Mansoor wali....., Tehsil Wazirabad....., District Gujranwala 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

Muzakar Hanif

Date: 20-12-2023



Disclosure of Relationship Form

(To be filled by Candidate)

I Muzakar Hanif, S/D/W/O M. Hanif Ahsan Holding CNIC
3410437414543 Resident of V.P.O. Gunian Wala Wazirabad
UC Mansoor Wali, Tehsil Wazirabad, District
Gujranwala 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:

M. Hanif Ahsan
Date: 20-12-2023



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

Name of Candidate as per CNIC:	Muzakko Hanif	
S/D/W of;		
CNIC NO:	3 4 1 0 4 3 7 4 1 4 5 4 3	
Position Applied:		
Permanent address as per CNIC:	House No:	Rana House.
	Street #:	Grunian wala
	Mohallah:	Lakxi wala Qabaistanwala
	Village:	Grunian wala
	Sector/UC:	Mansoor wali
	Town /Tehsil:	Wazirabad
	District	Gujranwala
	Current Residential Address: <i>(Kindly don't fill this section if permanent and residential addresses are same)</i>	House No:
Street#		
Mohallah:		
Village:		
Sector/UC		
Town /Tehsil:		
District		
Signature & Date:		Date of Form Filling:
	20-12-2023	



CHIP TRAINING & CONSULTING

JOINING REPORT BY A NEW EMPLOYEE

Name of the Employee	Muzakoo Hanif
Position appointed to	Safety Warden
Department and/or Location of appointment	Ugoki filling station Sialkot
CNIC#	34104-3741454-3
CNIC Expiry Date	19-3-2030
Date of Joining	14-08-2023
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	

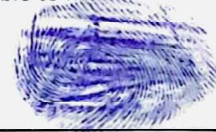


Bank Account Information	
Name of Employee	Muzakaz Hanif
Designation	Safet ^u warden
Union Council / Area	Mansoor Wali
District / Agency	Gujranwala
Contact No.	03440346368
CNIC No.	34104-3741454-3

Bank Account Title	Muzakaz Hanif
Bank Name	Habib Bank Limited
Bank Address	Wazirabad
Bank Branch Code	5067
Bank Account Number (With IBAN)	PK11Habb0050677901925803

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: 20-12-2023

Note:

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



HABIB BANK

حیب بینک

Dated: 20/12/2023

Account Maintenance Certificate

This is to certify that HBL is maintaining ISLAMIC BASIC BANKING ACCOUNT(BBA) Account Number 50677901925803 since 19-04-2021. The account is being maintained with following details.

Account Title	MUZAKAR HANIF
Account Number	50677901925803
IBAN	PK11HABB0050677901925803
Currency	PKR
Account Type	ISLAMIC BASIC BANKING ACCOUNT(BBA)
Account Status	Active
Account Opening Date	19-04-2021
CNIC	34104-3741454-3
Bank Name	HBL
Branch Name	ISLAMIC BANKING G.T.

This certificate is being issued on customer's request without any risk and responsibility on part of HBL or its employee(s).

This is a system generated certificate and does not require any signature.