# Application for Employment with CTC

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	Promises applied for July 1024	
	weeklik brotelegishi	
	(Expected Date of Induction Training	if selected).
(Personal Information)	313_1	
Watto Au	(Full Name) 13. J	1.1
4520104428681	(CNICNO) ASIA JE	1.2
	(大きな人)というないのからなる	13
45201-0442868-1	(Other Identification number if CNIC is not available )	
1990 / 01 / 01	(Date of Birth (YYYY/MM/DD) (いっぱいしい) かっきょ	1.4
(DOB not (Only Year available) (Day, Month, Year Available)	(グランダンダン design the bot (Tick any One) (Check DOB)	1.4.1
DUR MUHAMMAD CHANG	(Father's/Husband Name/ ハスタンカラー Name of i.e. Next Kin)	1.5
FATHER	(Relationship with Applicant)	1.6
Married	(Marital Status)	
MALE	(Gender)	
CHANG	(Tribe)	1.7
CHANG	(Ethnicity)	
URDU - ENGLISH - SINDHI- PUNS	JALANGUAGE) SERIKI	
OUSE # 68, STREET # 20 QILA MUHAMMAD		
AHORE	(District and Union Council)	1.8
louse # 6B, Street 20, Oila Muhammali	Rave Road, Lahore . 3,118.	1.9
(Residence) が、 (Mobile) が。 (E-mail) メン (Office) か	(Contact Detail)	2.0
LB by SHAH ABOUL LATIF UN	(Last Qualification)	21
INSTITUANT LAW COLLEGE, KHA		N.

	(Qua	lification) =	2- تعليي قابلي				
(List all your academic and technic school certificate (A	al qualifications, s			(4)	たけとうめい	Hard Shirtsay	18.60
With the same of t	CLA-ATI on Stubjectis)	(Certific Degree Of	cate/		sold (Institution)		lv sar)
1 DIVISION BIOLOG	(Science)	Matric		econde	ay School	2006	
GRADE C PHISICS	(HEMICTY)	Pre - N			Secondary	11.000	
	Zodosy, CHO		S	нан А	BOUL LATE	2010	UNIVERSITY 2015
(1	Present Employ	رمت (ment)	3-19.90 ملا				
(Give details of your present employ give these details in respect of					ما زمت رُكتيدا شافراه	ب دو کاری در کاری	آ/1 ڀڏافال
WAJID AU D	JR MUH	AMMAB	CHANG	(Name	of Employer)	/182 <sup>1</sup>	3.1
House # 6B, STA	EET 20 , (	ULAMU				OAD LA	3.2 HORE:
2020 - 2022					Joining)	٣٤٥ أقينا ل	3.3
JOUNEROR AD	VOCATE				ast Job Title)	آ قرقی البده	3.4
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20,000					ay) (vez	گول،بالدمبده (رد	3.7
(F	ast Work Expe	erience) - 3.	4-مابقه كام كا				
(List all the previous jobs held by you	a, starting from th	e earliest).	Ų.	M. de	نسیل، آ فری دارمت س	بلادمول كالبرست فأح	14-25-1
المؤمداريال	en			2,00	1821		=1/19
(Main duties performed by you)	بظامت أوال (Position be when you left t	ld by you	(Employe	r's Nan	ne & Address)	(Fr	om/To).
Managing & cont	welling						
the other employe	SUPER	VISER	WAJ	D	ALL	20	16-2011
To teach the							
student of matri	Teach	er	WAJI	D	ALI	2019	- 2020
lients to solve							0-2022

the cases.

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(Refer	ences) الموات (ences	•			
time domin of a regionary, and robited to you by blood or marriage, who can much for some character and work experience.	One+ 12 printed	المال المال عالم عالم المال	AUTHORIZE	ال (٢) والريات	1614
Abdullah Ali		(Full Name)	rechas	Jaries	5.1
03077110922		(Full Address)	کمل پد	First	
		(Contact Number) (Nature of association with your	1 Civia Chillia	Referee	
James James		(Full Address)	10/10/1-		
James		(Full Address)	- Club	118 100	5.2
0300 38 73 241		(Contact Number)	رابط فمبر	Second	0,2
leachel		(Nature of association with you)	Spreducij	Reteree	
Call			عمل نام		
Sayed Khan 0300 88 40 721		(Full Name) (Full Address)	عير للملا	تمراوال	5.3
0300188 40 121		(Contact Number)	راطفير	Third Referee	
1 munich		(Nature of association يوفيت with you)			
Lawyer					
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	Cave any other information to your application	n not covered by this form wh	ich in your opinion is	relevant	
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As soon as, possible	If an offer is made to you, I	low soon can you join to us?	weeking w	Fine 1	6 5
At least 35000 ref	What are your salary and	benefits expectations?	افاورو عربوا عدمي اليا الميدر	10104	0.0
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			۔ باکیاں ای میدوک کئے ذ	كرداري آر	_1
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Confirm and antify that the information given also us true correct and a	omplete to the best of my kn	owledge and beleft Taccept re	agronsibility for way in	(entitlement	
that be subsequently discovered					
(19K)		20 12	2022		
Cardelate a Superior		20-12	-2023	Total Damy	
Manager adjusted					



## Disclosure of Relationship Form

(To be filled by Candidate)

	ned by Candid				
1 NAJID ALI, S/D/V 4520101428681, Resident of SA	V/O Duty M	HA.M.M	MD H	Tolding C	ENIC ad
Adjultation Resident of Asia	Tehsil LA	HORE		Di	strict
UC					
wi	th CHIP Training	g & Cons	ulting (F	vt.) Ltd. und	er its
third party contract for PTPP project, do l	nereby declare as	s under:			
<ol> <li>That none of my blood/close rela sister, husband, wife, spouse, children, n</li> </ol>	maternal and pa	iternal ui	ncle, aur	it, niece, nep	hew,
brother/father/mother/sister-law or an	y other relation	ship wh	ich coul	ld come into	the
standard definition of "blood/close relat	ion" is employe	d under	PIPP pi	roject in the	same
district or PTPP or CTC offices in the sam	e province where	e I am ca	ndidate i	for this positi	on.

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/Distric t	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.

Date: 20 - 12 - 2023



#### DECLARATION FORM

### (TO BE FILLED BY THE EMPLOYEE)

WATIO ALL	S/D/W/O	DUB MUHAMI	A.A.D. holding
CNIC 452010.4428681,	Resident of	Str. 20 g. Hilliam	KOMY KOOL
Lasses Tehsil			
the position of	With C	HIP Training & Consulting	(Pvt) Ltd under its third
party contract for PTPP Project, do her	eby declare as un	der:	

- 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.
- 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

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

Date:



# **CHIP TRAINING & CONSULTING**

# JOINING REPORT BY A NEW EMPLOYEE

Name of the Employee	WAJID ALI CHANG
Position appointed to	Wajid Ali Chang
Department and/or Location of appointment	RAVI TRUCKING SHAHDRAM, LAHORE
CNIC#	4520104428681
CNIC Expiry Date	
Date of Joining	26 August 2023
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	



CHIP Training & Consulting (Pvt) Ltd					
urce Department					
nts Check List					
Focal Person for file management					
CNIC No	452010442868				
Resignation/ Termination Date					
	Focal Person for file management CNIC No Resignation/				

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		



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

Name of Candidate as per CNIC:	WAJID ALI
S/D/W of;	DUR MUHAMMAD CHANG
CNIC NO:	4520104428681
Position Applied:	SAFETY WARDEN
Permanent address as per CNIC:	House No: 6B
	Mohallah: QELA MUHAMMADI
	Village: RAVI ROAD
	Sector/UC:
	Town / Tehsil: LAHORE
	District LAHORE
Current Residential Address:	House No:
(Kindly don't fill this section if permanent and	Street#
residential addresses are same)	Mohallah:
	Village:
	Sector/UC
	Town / Tehsil:
01 1 1 1 1 1 1	District
Signature & Date:	Date of Form Filling: Signature of Applicant: