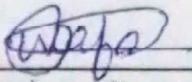


Bank Account Information

Name of Employee	WAFIA ABBAS
Designation	Safety Warden
Union Council / Area	Habizabad
District / Agency	U
Contact No.	0302-6655954
CNIC No.	34104-8416905-1

Bank Account Title	Current Account
Bank Name	Meezan Bank
Bank Address	Caujranwala road near GTS, HFD
Bank Branch Code	4501
Bank Account Number (With IBAN)	45010106841767

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: 20-12-23

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	WAFIA ABBAS
Position appointed to	Safety Warden
Department and/or Location of appointment	CTC, Shakeen Trucking Station
CNIC#	34104-8416905-1
CNIC Expiry Date	17-09-2028
Date of Joining	14-12-2023
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	



DECLARATION FORM

(TO BE FILLED BY THE EMPLOYEE)

I NAFA ABBAS, S/D/W/O FIJAZ AHMAD AWAN holding
CNIC 34104-8416905-1, Resident of Block 3, S. E. 2, Heman town UC
City, Tehsil Hafizabad, District Hafizabad Employee for
the position of Security 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 NAFA

Date: 20-12-23



Disclosure of Relationship Form

(To be filled by Candidate)

I WAFIA ABBAS, S/D/W/O FIJAZAHMAD ^{Awan} Holding CNIC 34104-8416-905-1
Resident of Street 3, Block 3, Henna Town, Hafiz
UC Hafizabad, Tehsil Hafizabad, District

..... Candidate for the position of
..... 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: 20-12-23

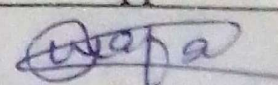
CHIP Training & Consulting (Pvt). Ltd
Declaration Form of Candidate for Residential Address
 (To be filled & signed by Candidate)

Name of Candidate as per CNIC:	WAEFA ABBAS
S/D/W of;	FLAZ AHMAD AWAN
CNIC NO:	3 4 1 0 4 8 4 1 6 9 0 5 1

Position Applied:	Safety Warden
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Permanent address as per CNIC:	House No:	1
	Street #:	Main Street
	Mohallah:	
	Village:	Dilawar Cheema
	Sector/UC:	17
	Town /Tehsil:	WAZIRABAD
	District	Punjabwala

Current Residential Address: (Kindly don't fill this section if permanent and residential addresses are same)	House No:	3
	Street#	2
	Mohallah:	HASSAN Town
	Village:	
	Sector/UC	Hafizabad
	Town /Tehsil:	Hafizabad
	District	u

Signature & Date:	Date of Form Filling:	Signature of Applicant:
	20-12-23	

5- حوالہ جات (References)

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

Muhammad Usama 0316-6662696 Shopkeeper	(Full Name) (Full Address) (Contact Number) (Nature of association with you)	تعمیل نام تعمیل پتہ رابطہ نمبر آپ کے ساتھ کام کی نوعیت	5.1 First Referee
M. Sharjeel JHARYANWALA, HAFIZABAD 0327-6569122 Cashier	(Full Name) (Full Address) (Contact Number) (Nature of association with you)	تعمیل نام تعمیل پتہ رابطہ نمبر آپ کے ساتھ کام کی نوعیت	5.2 Second Referee
Muhammad Rizwan Latif کوٹھی میاں سٹریٹ، میدانوں پشور 0300-2147105 Individual Assistant	(Full Name) (Full Address) (Contact Number) (Nature of association with you)	تعمیل نام تعمیل پتہ رابطہ نمبر آپ کے ساتھ کام کی نوعیت	5.3 Third Referee

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 جرم تو قرار نہیں پائے، اگر ہاں تو تفصیل بتائیں Have you ever been tried or convicted for any crime? If so, give full details.
IT is Fine	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
From Today	6.4 اگر ہم آپ کو اپنے ادارے 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?
40 or Above + Transportation	6.5 آپ کی متوقع تنخواہ اور دیگر فائدہ ان 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؟

I am dedicated to any of my work and provides my total potential to my duties.
Lastly, I like to tell about safety to people.

درخواست گزار کا حلف نامہ

میں تصدیق کرتا کرتی ہوں کہ اوپر دی گئی تمام معلومات میرے علم اور یقین کے عین مطابق تھی، درست اور مکمل ہیں، بعد میں کسی بھی معلومات کے نفاذ ہونے کی صورت میں تازگی کا روائی 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

20-12-23

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 (میسٹرک سے شروع کریں)

گریڈ/ڈویژن (Grade/Division)	اہم مضامین (Major Subjects)	سرٹیفکیٹ حاصل کردہ گری (Certificate/ Degree Obtained)	ادارہ (Institution)	سال (Year)
A	Science	Matric	CHS, D. J. S.	2015
C	FSC (Pre-med)	Intermedic	Govt College	2017
A ⁺	BS (Science)	BS (Hons.)	GCUF	2021

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

3.1	آجر کا نام	(Name of Employer)	Mr. Winggz
3.2	آجر کا مکمل پتہ	(Employer's Address)	Tinnah Chowk, Hafizabad
3.3	تاریخ تہناتی	(Date of Joining)	15-04-23
3.4	آخری عہدہ	(Your Last Job Title)	Supervisor
3.5	اہم ذمہ داریاں	(Main Duties)	Dispatch Control, Food Inspection
3.6	مجاز آفیسر کا نام اور عہدہ	(Name & Title of your Immediate Boss)	M. Adil, Branch Manager
3.7	مجموعی ماہانہ عہدہ (روپے میں)	(Gross Monthly Pay)	18,000

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-ہفتہ-سال تا دن-ہفتہ-سال (From/To) (D/M/Y to D/M/Y)
Inspection	Supervisor	Mr. Winggz	2023-23
Freelancing Marketing	Virtual Assistant	Editore Pvt. Ltd	2021-22
Store Inspection Sales Management	Sales Manager	Usana Super Store	2021-22

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 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.

Affix a recent passport sized Colour photograph here

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

..... (Position applied for) عہدہ کا نام جس کے لئے درخواست دی گئی:

..... منتخب ہونے پر تعیناتی تربیت کی متوقع تاریخ: (سہ ماہیہ میں) (Expected Date of Induction Training if selected)

(Personal Information) 1- ذاتی معلومات

WAFIA ABBAS	(Full Name) تمام نام	1.1	
34104-8416 905-1	(CNIC No.) شناختی کارڈ کا نمبر	1.2	
	(Other Identification number if CNIC is not available) دیگر شناختی نمبر (شناختی کارڈ سے سزا ہونے کی صورت میں)	1.3	
06-03-2000	(Date of Birth) تاریخ پیدائش (سال/ہمیشہ/روز) (YYYY/MM/DD)	1.4	
<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
FIJAZ AHMAD AWAN	(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	
Single	(Marital Status) ازدواجی حیثیت		
Male	(Gender) صنف		
AWAN	(Tribe) قبیلہ	1.7	
AWAN	(Ethnicity) ذات		
Urdu, Punjabi	(Language) زبان		
Main Street, P.O KHASS Dilwan Cheema	(Permanent Address) تمام پتہ	1.8	
Tensi Wazirabad, Dist. Gujranwala	(District and Union Council) ضلع یا یونین کونسل		
Block 3, Street 2, Haxan Town	(Present Address) موجودہ پتہ	1.9	
(Residence) فون: 0302-6655934	(Contact Detail) رابطہ کی تفصیل	2.0	
(E-mail) ای میل	(Office) دفتر		
BS (Hons.)	(Last Qualification) آخری تعلیمی سند	2.1	