

Under Section 23-Pakistan Citizenship Rules

No. TTS-9-2016-2070

## APPENDIX-XIV

Dated: 29-9-2016

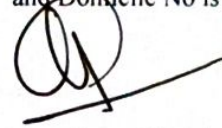
## FORM 'P-1'

The Pakistan Citizenship Act, 1951 (II OF 1951)

and the rules made there under or (vide rule 23)

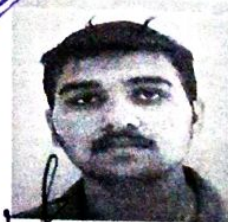
**CERTIFICATE OF DOMICILE**Whereas WAHEED UR REHMAN S/O MUHAMMAD MUNIR

has applied for the grant of a certificate of domicile under the Pakistan Citizenship Act, 1951 (II of 1951), alleging with respect to himself / herself the particulars set out below and has satisfied the undersigned that the conditions laid down in Section 17 of the said Act for the grant of a Certificate of Domicile are fulfilled in the said

WAHEED UR REHMAN case.NOW, Therefore, in pursuance of the powers conferred by the said Act and the rules made there under, the undersigned hereby grants to the said WAHEED UR REHMAN this Certificate of Domicile.In Witness whereof, I have hereto subscribed my name this day of 29-9-2016 and Domicile No is TTS-9-2016-2070.


for District Coordination Officer,  
Toba Tek Singh

## FULL PARTICULARS RELATING TO THE APPLICANT

Full Name WAHEED UR REHMANS/O MUHAMMAD MUNIRAddress in Pakistan CHAK NO 721/GBPlace of Domicile -(Domicile) Tehsil Pir-mahal District Toba Tek Singh Prov/Admn: PUNJABDate of Arrival in Place of Domicile Since BirthMarried/Single/Widow/Widower. SingleName of Wife or Husband N/AName of Children and their Ages N/ATrade or Occupation StudentMark of Identification N/A

  
for District Coordination Officer,  
Toba Tek Singh

Serial No. 1213034

## ALLAMA IQBAL OPEN UNIVERSITY, ISLAMABAD



## TRANSCRIPT

DMC No. 001376194-2 Registration No. 17PRI06346  
 Name WAHEED UR REHMAN Enrollment Semester SPR-2020  
 Father's Name MUHAMMAD MUNIR Final Semester AUT-2022  
 Address HOUSE NO DD 199 STREET NO 10 NEAR MIRZA YA JHANDA CHICHI RAWALPINDI  
 PUNJAB  
 Tehsil RAWALPINDI  
 District RAWALPINDI



has successfully completed ASSOCIATE DEGREE IN MASS COMMUNICATION  
 with Group/Major/Specialization  
 The detail of passed courses is as under:

Semester	Course Code	Credits	Title of Courses	Marks	
				Maximum	Obtained
SPR-2020	0416	3	ISLAMIAT	100	62
SPR-2020	1423	3	COMPULSORY ENGLISH-I	100	56
AUT-2020	0430	6	PRINCIPLES OF JOURNALISM	100	77
AUT-2020	0449	3	MAGAZINE JOURNALISM	100	85
AUT-2020	1421	3	INTRODUCTION TO ENVIRONMENT	100	54
AUT-2020	1424	3	COMPULSORY ENGLISH-II	100	68
AUT-2020	1429	3	BUSINESS MATHEMATICS	100	71
AUT-2020	1431	3	BASICS OF INFORMATION & COMMUNICATION TECHNOLOGY	100	67
SPR-2021	0411	6	SOCIOLOGY-I	100	66
SPR-2021	0431	3	REPORTING	100	53
SPR-2021	0452	3	MASS COMMUNICATION	100	64
SPR-2021	0455	3	BOOK EDITING	100	59
SPR-2021	0485	3	HEALTH AND NUTRITION	100	55
AUT-2021	0451	3	PUBLIC RELATIONS	100	59
AUT-2021	0453	3	RADIO BROADCASTING	100	74
AUT-2021	0454	3	TV BROADCASTING	100	67
AUT-2021	0461	3	ADVERTISING	100	51
SPR-2022	0417	3	PAKISTAN STUDIES	100	58
AUT-2022	0458	6	COMMUNITY DEVELOPMENT	100	61

Total Credits 66 Total Marks/Obtained 1900 / 1207  
 Result Declared on Aug 5, 2023 Percentage/Grade 64 / B  
 Date of Issue Nov 21, 2023

  
 Additional Controller (C&D)

  
 Controller of Examinations

Disclaimer:

This result card/transcript is issued provisionally, errors and omission excepted, as a notice only. Any entry appearing in this card does not itself confer any right or privilege on a candidate for the grant of certificate/degree/diploma, which will be issued under the rules/regulations on the basis of the original record of the university student.



**PAKISTAN**

**National Identity Card**



ISLAMIC REPUBLIC OF PAKISTAN

Name

**Waheed Ur Rehman**

وحید ار رحمان



Father Name

**Muhammad Munir**

محمد منیر



Gender

**M**

Country of Stay

**Pakistan**

Identity Number

**37405-8891504-9**

Date of Birth

**02.09.1998**

Date of Issue

**10.10.2016**

Date of Expiry

**10.10.2026**

Waheed Ur Rehman

Holder's Signature

93823

37405-8891504-9

موجودہ پتہ: مکان نمبر 199، سٹریٹ نمبر 10، محلہ جھنڈا

پہلی، راولپنڈی کینٹ، تحصیل و ضلع راولپنڈی



مستقل پتہ: ڈاک خانہ خاص، چک 721 گ ب، تحصیل کمالیہ، ضلع

نوبہ ٹینک سنگھ

505061008630

Usman Y. Malik

Registrar General of Pakistan

گمشدہ کارڈ ملنے پر قریبی لیڈ بکس میں ڈال دیں

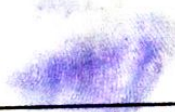


Bank Account Information	
Name of Employee	Waheed - WS - Rehman
Designation	Safety warden
Union Council / Area	cantt (Rawalpindi)
District / Agency	Rawalpindi
Contact No.	0347-0919344 / 0305-5106244
CNIC No.	37405-8891504-9

Bank Account Title	Waheed - WS - Rehman
Bank Name	Allied Bank limited
Bank Address	Tipu Road Sirsyed Chowk R.W.P
Bank Branch Code	0726
Bank Account Number (With IBAN)	PK22 ABPA 001 00 6555 99 00014

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: 18-1-24

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



## DECLARATION FORM

(TO BE FILLED BY THE EMPLOYEE)

I Waheed - Us - Rehman, S/D/W/O Muhammad Mubir, holding  
CNIC 37405-8891504-9, Resident of Rawalpindi, UC  
cauti, Tehsil cauti, District Rawalpindi 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

Waheed

Date: 18-1-24

Application for Employment with CTC



Instructions

- Read the whole form carefully before starting to fill it in.
- The 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.

صرف دفتری استعمال کے لئے (یہ فی سیٹاف کی جانب سے بھرا جائے گا) (For official use only to be filled by CTC Staff)

Safety warden

(Position applied for) - درخواست دی گئی

18-01-2024

منتخب ہونے پر تصدیقاتی تربیت کی متوقع تاریخ (سال/مہینہ/دن)

(Expected Date of Induction Training if selected)

1۔ ذاتی معلومات (Personal Information)

Waheed - us - Rehman	(Full Name) مکمل نام	1.1	
37405-8891504-9	(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	
02-09-1998	(Date of Birth) تاریخ پیدائش (سال/مہینہ/دن) (YYYY/MM/DD)	1.4	
<input type="checkbox"/> تاریخ پیدائش کی معلوماتیں (DOB not Mentioned)	<input type="checkbox"/> صرف سال معلوم ہے (Only Year available)	<input type="checkbox"/> دن، مہینہ، سال معلوم ہے (Day, Month, Year Available)	1.4.1
Muhammad Munir	(Father's/Husband Name/ Name of i.e. Next Kin) والد شوہر یا زونہی رشتہ دار کا نام	1.5	
Father	(Relationship with Applicant) امیدوار کے ساتھ رشتہ	1.6	
Single	(Marital Status) ازدواجی حیثیت	1.7	
Male	(Gender) صنف		
Suhni	(Tribe) قبیلہ		
Jatt	(Ethnicity) ذات		
Urdu	(Language) زبان	1.8	
H#DD199, Street 10, Thanda chichi Cantt Rawalpindi -	(Permanent Address) مکمل پتہ		
H#DD199, Street 10, Thanda chichi Cantt Rawalpindi -	(District and Union Council) ضلع یا یونین کونسل		
H#DD199, Street 10, Thanda chichi Cantt Rawalpindi -	(Present Address) موجودہ پتہ	1.9	
0347-0919344 (Mobile) رہائشی (E-mail) آفس	(Contact Detail) رابطہ کی تفصیل	2.0	
Bachelor	(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 فنی قابلیت کی اس کی فہرست لکھیں (میلزک سے شروع کریں)

گرید/ڈویژن (Grade/Division)	اہم مضامین (Major Subjects)	سرٹیفکیٹ حاصل کردہ درجہ (Certificate/ Degree Obtained)	ادارہ (Institution)	سال (Year)
1) C	Eng, Phy, Math	Matric	F.B.I.S.E	2016
2) B	Eng, Math, Econ	Intermediate	A.I.O.U	2019
3) B	Bachelor	Bachelor	A.I.O.U	2022

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، توگزشتہ ملازمت کی تفصیلات فراہم کریں

uwheed - us - Rehman	(Name of Employer)	آجر کا نام	3.1
House No DD 199, street No 10, Mohallah Jhanda chichi Rawalpindi	(Employer's Address)	آجر کا مکمل پتہ	3.2
10/10/2019	(Date of Joining)	تاریخ تعیناتی	3.3
30/10/2023	(Your Last Job Title)	آخری عہدہ	3.4
Area Incharge overall area / ward Hand over	(Main Duties)	اہم ذمہ داریاں	3.5
ISRAH Khan	(Name & Title of your Immediate Boss)	مجاز آفیسر کا نام اور عہدہ	3.6
28,000	(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)	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)
Area Incharge overall area hand over -	Area Incharge	uwheed - us - Rehman Jhanda chichi R.w.p	10/10/2019 30/10/2023



5-حوالہ جات (References)

آپ کو کم از کم تین (3) حوالہ جات درج کرنے کا تعلق آپ کے کسی فونل یا شاخ سے ہے۔ ہر حوالہ جات کے ساتھ آپ کے کردار اور 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.

5.1	پہلا حوالہ	5.1	Full Name	Saeed Jatt
	First Referee		Full Address	Jhauda Chichi Rawalpindi
			Contact Number	0347-5461324
			Nature of association with you	Friend
5.2	دوسرا حوالہ	5.2	Full Name	Muhib Ali
	Second Referee		Full Address	Jhauda Chichi Rawalpindi
			Contact Number	0336-9367134
			Nature of association with you	Friend
5.3	تیسرا حوالہ	5.3	Full Name	Nooman
	Third Referee		Full Address	Jhauda Chichi Rawalpindi
			Contact Number	0345-5292898
			Nature of association with you	Friend

6-عمومی معلومات (General Information)

6.1	کیا آپ کو کوئی معذوری یا بیماری تو نہیں ہے، اگر ہاں تو تفصیل بتائیں	No
6.2	کیا آپ کبھی کسی کام کے سلسلے میں مجرم قرار نہیں پائے، اگر ہاں تو تفصیل بتائیں	No
6.3	آپ کے خیال میں درخواست سے متعلق کوئی ایسی معلومات جو اس فارم میں موجود نہیں آپ ہمیں بتا سکتے ہیں۔	No
6.4	اگر ہم آپ کو اپنے ادارے میں کام کرنے کے لئے بلائیں، آپ کتنے عرصہ میں ہمارے ساتھ کام کر سکتے ہیں؟	Yes
6.5	آپ کی متوقع تنخواہ اور دیگر فوائد کی کیا امید رکھتے ہیں؟	Yes

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.)  
I am very hard working person and my working is so good.

درخواست گزار کا حلف نامہ

میں تصدیق کرتا کرتی ہوں کہ اوپر دی گئی تمام معلومات میرے علم اور یقین کے ضمن مطابق ہیں، درست اور مکمل ہیں، بعد میں کسی بھی معلومات کے غلط ہونے کی صورت میں تاویلی 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)

18-1-24 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:	Waheed - us - Rehman	
S/D/W of:	Muhammad Muniy	
CNIC NO:	3 7 4 0 5 8 8 9 1 5 0 4 9	
Position Applied:	safety warden	
Permanent address as per CNIC:	House No:	House No DD 199,
	Street #:	street No 10
	Mohallah:	Mohallah Jhanda chichi
	Village:	Rawalpindi
	Sector/UC:	cauth
	Town /Tehsil:	cauth
	District	Rawalpindi.
	Current Residential Address: <small>(Kindly don't fill this section if permanent and residential addresses are same)</small>	House No:
Street#		street No 10
Mohallah:		Mohallah Jhanda chichi
Village:		Rawalpindi
Sector/UC		cauth
Town /Tehsil:		cauth
District		Rawalpindi.
Signature & Date:		Date of Form Filling:
	18-1-24	Waheed



### Disclosure of Relationship Form

(To be filled by Candidate)

I Wahed - ur Rehman S/D/W/O Muhammad Muhiy Holding CNIC  
37405-8891504-9 Resident of House No DP 199, Street No 10, Thanda Chilly, P.W.P  
UC Rawalpindi Tehsil cautt District Rawalpindi  
Safety warden 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: Wahed

18-1-24

Date:



[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	Wahed - us - Rehman
Position appointed to	Safety warden
Department and/or Location of appointment	Ichanna Zilling station
CNIC#	37405-8891504-9
CNIC Expiry Date	10-10-2026
Date of Joining	18-1-24
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	