

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) صرف فز کی مشاغل کے لئے (فزی کی ای ٹاف کی جانب سے پورا ہائے گا)

Safety warden

(Position applied for) (Position applied for)

(Expected Date of Induction Training if selected)

(Expected Date of Induction Training if selected)

(Personal Information) 1- ذاتی معلومات

Ali Ahem Ali Ahmed	(Full Name) مکمل نام	1.1
34101-722 4121-7	(CNIC No) شناختی کارڈ نمبر	1.2
	(Other Identification number if CNIC is not available)	1.3
11-06-2001	(Date of Birth) تاریخ پیدائش (YYYY/MM/DD)	1.4
<input type="checkbox"/> DOB not Mentioned <input type="checkbox"/> Only Year available	(DOB not Mentioned) (Only Year available)	1.4.1
	(Father's/Husband Name/ Name of i.e. Next Kin)	1.5
Self	(Relationship with Applicant) امیدوار کے ساتھ رشتہ	1.6
Single	(Marital Status) ازدواجی حیثیت	1.7
Male	(Gender) صنف	
Islam	(Tribe) قبیلہ	
Malik	(Ethnicity) ذات	
Urdu	(Language) زبان	1.8
Street no 3 Rahwali Moh shrif Bura Chajranwala	(Permanent Address) مکمل پتہ	
	(District and Union Council) ضلع اور یونین کونسل	1.9
Street no 3 Rahwali Moh shrif Bura Chajranwala	(Present Address) موجودہ پتہ	1.9
(Residence) 03020222700 (Mobile)	(Contact Detail) رابطہ کی تفصیل	2.0
(E-mail) (Office)	(Contact Detail) رابطہ کی تفصیل	2.0
Intermediate	(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 اسناد کی فہرست لکھیں (میلک سے شروع کریں)

گریڈ/ڈویژن (Grade/Division)	اہم مضامین (Major Subjects)	سرٹیفکیٹ حاصل کردہ ڈگری (Certificate/ Degree Obtained)	ادارہ (Institution)	سال (Year)
63/-	science	Matric	Bise GJW	2018
501.	ICS	Inter	Bise GJW	2020

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)	آزکام	3.1
	(Employer's Address)	آزکام کھل پتہ	3.2
	(Date of Joining)	تاریخ توثیق	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)	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)	آزکام اور پتہ (Employer's Name & Address)	دورانیہ دن - مہینہ - سال تا دن - مہینہ - سال (From/To) (D/M/Y to D/M/Y)

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 کو کم از کم تین (3) حوالہ جات دیں جن کا تعلق آپ کے کسی غولی یا شاہدی سے نہ ہو، بلکہ جو آپ کے کردار اور کام کے تجربے سے واقف ہو۔

Umar Farooq	(Full Name) مکمل نام	5.1
Moh nayi abadi Gakhar mandi	(Full Address) مکمل پتہ	First Referee
0300 7459 547	(Contact Number) رابطہ نمبر	
Coolique	(Nature of association with you) آپ کے ساتھ کام کی نوعیت	
M. Shehbaz	(Full Name) مکمل نام	5.2
Moh banglaabali Gakhar	(Full Address) مکمل پتہ	Second Referee
0300 7743 314	(Contact Number) رابطہ نمبر	
Teacher	(Nature of association with you) آپ کے ساتھ کام کی نوعیت	
Saad Riasat	(Full Name) مکمل نام	5.3
Moh Shareef Pura Rahwi	(Full Address) مکمل پتہ	Third Referee
0305 5428 589	(Contact Number) رابطہ نمبر	
Electrition	(Nature of association with you) آپ کے ساتھ کام کی نوعیت	

6-عمومی معلومات (General Information)

No	6.1 کیا آپ کو کوئی معذورئی 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 nay crime? If so, give full details.
N/A	6.3 آپ کے خیال میں درخواست سے متعلق کوئی ایسی معلومات جو اس فارم میں موجود نہیں آپ ہمیں بتا سکتے رہکتی ہیں۔ Give any other information not covered by this form which in your opinion is relevant to your application
3 Years	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?
Batter salery	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؟

I will do work honestly and you will not have any complain about me in future.

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.

Ali Ahmad

امیدوار کے دستخط
(Candidate's Signature)

14-may-2024

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 Ahmed														
S/D/W of;	Malik M. Imran														
CNIC NO:	<table border="1" style="width:100%; text-align:center; border-collapse: collapse;"> <tr> <td>3</td><td>4</td><td>1</td><td>0</td><td>1</td><td>7</td><td>2</td><td>2</td><td>4</td><td>1</td><td>2</td><td>1</td><td>7</td> </tr> </table>		3	4	1	0	1	7	2	2	4	1	2	1	7
3	4	1	0	1	7	2	2	4	1	2	1	7			
Position Applied:	Safety warden														
Permanent address as per CNIC:	House No:	506													
	Street #:	3													
	Mohallah:	Sharif pura													
	Village:	Rahwali													
	Sector/UC:														
	Town /Tehsil:	Gujranwala													
	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:		4													
Sector/UC															
Town /Tehsil:															
District															
Signature & Date:		Date of Form Filling:	Signature of Applicant:												



Disclosure of Relationship Form

(To be filled by Candidate)

I Ali Ahmed....., S/D/W/O M. Imran....., Holding CNIC 3410172741217
Resident of Moh. Shrif. Pura Rahwali Gujranwala
UC....., Tehsil Gujranwala....., 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.

Ali Ahmed
Signature:

14-may-2024
Date:



DECLARATION FORM (TO BE FILLED BY THE EMPLOYEE)

I Ali Ahmed.....S/D/W/O Malik M. Imran..... holding
CNIC 3410172241217..... Resident of Moh sharif pura Rahwal UC
Gujranwala..... Tehsil Gujranwala..... 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.

Ali Ahmed
Signature

14-may-2024

Date:



Bank Account Information

Name of Employee	Ali Ahmed
Designation	safety warden
Union Council / Area	cantonment board Gujranwala
District / Agency	Gujranwala
Contact No.	0302 0222700
CNIC No.	34101-7224121-7

Bank Account Title	Ali Ali Ahmed
Bank Name	Meezan bank
Bank Address	Rahwali cantt
Bank Branch Code	(0919)
Bank Account Number (With IBAN)	(PK27MEZNO009190108191669

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: 14-05-2024

Note:

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



CHIP TRAINING & CONSULTING

JOINING REPORT BY A NEW EMPLOYEE

Name of the Employee	Ali Ahmed
Position appointed to	Safety warden
Department and/or Location of appointment	canal view daska
CNIC#	34101-7224121-7
CNIC Expiry Date	02-06-2030
Date of Joining	13-05-2024
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	