

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

مہدو کا نام: (Position applied for) مہدو کے لئے درخواست دی گئی
منتخب ہونے پر قیام پائی تربیت کی متوقع تاریخ (سال/مہینہ/دن)
(Expected Date of Induction Training if selected)

1۔ ذاتی معلومات (Personal Information)

Bilal Hassan	(Full Name) مکمل نام	1.1
38406-0566010-7	(CNIC No.) شناختی کارڈ نمبر	1.2
	دیگر شناختی نمبر (شناختی کارڈ میسرن ہونے کی صورت میں) (Other Identification number if CNIC is not available)	1.3
06-01-2004	(Date of Birth) تاریخ پیدائش (سال/مہینہ/دن) (YYYY/MM/DD)	1.4
<input type="checkbox"/> تاریخ پیدائش مذکور نہیں ہے (DOB not Mentioned) <input type="checkbox"/> صرف سال مذکور ہے (Only Year available) <input checked="" type="checkbox"/> دن/مہینہ/سال مذکور ہے (Day, Month, Year Available)	(Tick any One) (Check DOB) (کسی ایک پر نشان لگائیں)	1.4.1
Manzoor Ahmed	(Father's/Husband Name/ Name of i.e. Next Kin) والد شوہر/خوئی رشتہ دار کا نام	1.5
Father	(Relationship with Applicant) امیدوار کے ساتھ رشتہ	1.6
Unmarried	(Marital Status) ازدواجی حیثیت	1.7
Male	(Gender) صنف	
	(Tribe) قبیلہ	
Ghorayaha	(Ethnicity) ذات	
Urdu - Punjabi	(Language) زبان	1.8
خوش گمرد والا - تحصیل کوٹلی ضلع سرگودھا	(Permanent Address) مکمل پتہ	
Sargodha	(District and Union Council) ضلع/یونین کونسل	1.9
خوش گمرد والا تحصیل کوٹلی ضلع سرگودھا	(Present Address) موجودہ پتہ	
0304-0561950 (Mobile) موبائل نمبر بیل (Residence) (E-mail) bilal Hassan 95799@gmail.com (Office) * (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 تکنیکی قابلیت کی اسناد کی فہرست لکھیں (مینٹرک سے شروع کریں)

گریڈ/ڈویژن (Grade/Division)	اہم مضامین (Major Subjects)	سرٹیفکیٹ حاصل کردہ ڈگری (Certificate/ Degree Obtained)	ادارہ (Institution)	سال (Year)
A	Science	Matric	Govt. High School Ghaus M Wala	2019
D	F.A. Ics	Intermediate	Govt. Associate College Bhagtanwala	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

Bilal Hassan	(Name of Employer)	آجر کا نام	3.1
محوت محمد وال محفل کوٹھون ضلع سرگودھا	(Employer's Address)	آجر کا مکمل پتہ	3.2
14-06-2024	(Date of Joining)	تاریخ تعیناتی	3.3
Restaurant waiter	(Your Last Job Title)	آخری عہدہ	3.4
waiter	(Main Duties)	اہم ذمہ داریاں	3.5
Ibrar Hussain	(Name & Title of your Immediate Boss)	مجاز آفیسر کا نام اور عہدہ	3.6
34000/-	(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)
waiter	waiter	Bilal Hassan Ghaus M Wala Sangochha	5-04-24 15-05-24

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.			
5.1	پہلا حوالہ First Referee	کامل نام (Full Name) Rizwan Ali	کامل پتہ (Full Address) غوث محمد والا تحصیل کوئٹون ضلع سرگودھا
		رابطہ نمبر (Contact Number) 0307-5455151	آپ کے ساتھ کام کی نوعیت (Nature of association with you)
5.2	دوسرا حوالہ Second Referee	کامل نام (Full Address) Qaisat Abbas	کامل پتہ (Full Address) غوث محمد والا تحصیل کوئٹون ضلع سرگودھا
		رابطہ نمبر (Contact Number) 0328-0435596	آپ کے ساتھ کام کی نوعیت (Nature of association with you)
5.3	تیسرا حوالہ Third Referee	کامل نام (Full Name) Asad Ali	کامل پتہ (Full Address) غوث محمد والا تحصیل کوئٹون ضلع سرگودھا
		رابطہ نمبر (Contact Number) 0325-0225572	آپ کے ساتھ کام کی نوعیت (Nature of association with you)

6-عمومی معلومات (General Information)	
6.1	کیا آپ کو کوئی مفذوری 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 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 بتا سکتے ہیں۔ Give any other information not covered by this form which in your opinion is relevant to your application.
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؟ If an offer is made to you, how soon can you join to us?
ON Demand	
6.5	آپ کی متوقع تنخواہ اور دیگر فوائڈ 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؟	

درخواست گزار کا حلف نامہ	
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.	

Bilal Hassan
(Candidate's Signature)

13-06-24 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:	Bilal Hassan	
S/D/W of;	Manzoor Ahmed	
CNIC NO:	3 8 4 0 6 0 5 6 6 0 1 0 7	
Position Applied:		
Permanent address as per CNIC:	House No:	04
	Street #:	03
	Mohallah:	Mochian
	Village:	Ghous Muhammad wala
	Sector/UC:	Sargodha
	Town /Tehsil:	Kotmomin
	District	Sargodha
	Current Residential Address: <i>(Kindly don't fill this section if permanent and residential addresses are same)</i>	House No:
Street#		03
Mohallah:		Mochian
Village:		Ghous Muhammad Wala
Sector/UC		Sargodha
Town /Tehsil:		Kotmomin
District		Sargodha
Signature & Date:		Date of Form Filling:
	13-06-2024	Bilal Hassan

[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	Bilal Hassan
Position appointed to	Safety Warden
Department and/or Location of appointment	Faisalabad
CNIC#	38406-0566010-7
CNIC Expiry Date	06-03-32
Date of Joining	14-06-2024
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	



DECLARATION FORM

(TO BE FILLED BY THE EMPLOYEE)

I Bilal Hassan.....S/D/W/O Manzoor Ahmed....., holding CNIC 38426-0566010-7 Resident of Ghaus M. kala Sargodha....., UC Sargodha....., Tehsil Kotmemran....., District Sargodha..... 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

Bilal Hassan

Date:

13-06-24



Bank Account Information


Name of Employee	Bilal Hassan
Designation	Safety Warden
Union Council / Area	Sargodha - Ghous Muhammad Wala
✓ District / Agency	Sargodha
Contact No.	0304-0561950
CNIC No.	38406-0566010-7

Bank Account Title	- Bilal Hassan
Bank Name	Jazzcash
Bank Address	Jazzcash digital Application
Bank Branch Code	
Bank Account Number (With IBAN)	0326-0561950 - PK11JCMA0909923260561950

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.

Bilal Hassan

Employee Signature
(Mandatory)


Employee Thumb Impression
(Mandatory)

Dated: 13-06-2021

Note:

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



Disclosure of Relationship Form

(To be filled by Candidate)

I Bilal Hassan, S/D/W/O Manzoor Ahmed Holding CNIC
38406-0566010-7 Resident of Pakistan Ghaus Muhammad wala Sargodha
UC Sargodha Tehsil Kotmomin District
Sargodha 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:

Bilal Hassan

Date:

13-06-24