### Application for Employment with CTC

### Instructions

- \* Read the whole form carefully before starting to fill it in:
- \* This feeth 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 constructed as a gross misconduct, hable to be punished by instant dismissal and other disciplinary action as may be appropriate to the nature of misstatement.



	نہال کے لئے (ی ٹی میٹائس کی جانب ہے گھراجا گٹا) (led by CTC Staff)	صرف ولغز ي اسا
39/20/9 w9/des	ر المحال (Position applied for) کی کے در قوات در گائی: (عال رمجید مدن) رقعیاتی تربیت کی موقع تاریخ: (عال رمجید مدن) (Expected Date of Induction Training i	منتب ہوئے
(Personal Information) معلومات	13_1	
یا سِن علی	(Full Name) کلل تام	- 1.1
42501-7462348-3	شاختی کارڈ کا فمبر (:CNIC No)	1.2
	وگرشاختی نمبر (شاختی کار ڈمیسر نہ ہونے کی صورت میں ) Other Identification number if CNIC is not available )	1.3
19/12/1991	(Date of Birth (YYYY/MM/DD) (مال رمبية رون)	1.4
ون بمین سال معلوم ہے اس کے پیدائش معلوم ہیں ۔ (DOB not (Only Year available) (Day, Month, Year Available)	تاریخ پیدائش کا جا کزولیس (کسی ایک پرختان لگائیں) (Check DOB) (Check DOB)	1.4.1
على فحد (والر)	(Father's/Husband Name/ الدرثو بررخوني رشة داركانام Name of i.e. Next Kin)	1.5
والر	(Relationship with Applicant) امیدوار کے ساتھ رشتہ	1.6
ستادي ستده	(Marital Status) از دوا کی مثیت	
239	(Gender) منف	
0 3° m	(Tribe)	1.7
و في المختلي	(Ethnicity)	
سررهی	(Language) نېان	
علم فامحيلي باره ابراهيم صررى لورن	(Permanent Address) توليلة	
كريك صلع ملير كراجي	(District and Union Council) سفطع يابو نعن كونسل	1.8
	(Present Address) = = = = = = = = = = = = = = = = = =	1.9
(Residence) \$ 03062851287(Mobile) \$ (E-mail) \$ (Office) \$	(Contact Detail) ليطني المسلم	2.0
Ship	(Last Qualification) يند ويقلعي سند	2.1

# $[CTC-HRO-NI-Recruitment \& Selection-7.8.6-d-003] \\ [Locality Verification Form-Jan 2020]$

# (Qualification) تعلیمی قابلیت

(List all your academic and technical qualifications, starting with school certificate (Matriculation)

تمام قلیمی و تکنیکی قابلیت کی اسناد کی فہرست تکھیں (میٹرک سے شروع کریں)

گریدُرڈویژن (Grade/Division)	ا بهم مضامین (Major Subjects)	مرٹیفیکیٹ رحاصل کردہ ڈگر ی (Certificate/ (Degree Obtained	اداره (Institution)	(Year)
- C."	Biology, English Chemistry	MaTRIC	AHAD Siddique Sec School	2009

موجوده ملازمت (Present Employment)	.3	
(Give details of your present employment. (If you are currently unemployed, give these details in respect of the last employment held by you).	، بے روزگار میں ، تو گزشتہ ملازمت کی تفصیلات فرا ہم کریں	أكرآپ فى الحال
Yaseen Aci	(Name of Employer)	3.1
	(Employer's Address) جية (Employer's Address)	3.2
Khaskheli Mohallah Ibrahim hydri- 091-06-2022	(Date of Joining)	3.3
SAFETY WARDEN	(Your Last Job Title) آخری عبده	3.4
Rikae and Rick dlaw Atagolling.	(Main Duties) الميم ذمدواريال	3.5
Bikes qual Rickshaw Strapbling. Barkat AC:	(Name & Title of your المجازة فيسركانام اورعبده Immediate Boss)	3.6
34000/=	(Gross Monthly Pay) (رویه یس) Pay)	3.7

List all the previous jobs held by you, s	tarting from the earliest).	4 - ما بقد کا م کا تج نبرت کاتفصل، آخری ملازمت سے شروع کریں	آپ کی تمام سابقه ملازمتوں کی
ایم دِمددادیال (Main duties performed by you)	همهره رخی عبده جب طاؤمت چوژی (Position held by you when you left this employer)	کاٹام اور ہے: (Employer's Name & Address)	وورانیه ان میمیز سال تادان میمیز سال (From/To) (D/M/Y to D/M/Y)
Ganerator operator	2019	Kanpa international	06 years
Generales operates		GRACE KNIT WEAR	03 years

(Refer	ences) حواله جات				
Give details of 3 references, not related to you by blood or marriage, who can vouch for your character and work experience	نآپ کے کرواراور کام کے تجربے سے واق	ن خونی یاشادی سے جڑے دشتہ سے نہ ہو، بلکہ ج	دیں، جن کا تعلق آپ کے کہ	تين (٣) حواله جات	آپ کم از کم
		(Full Name)	ما يام	بهلاحواله	5.1
Passi laladkia O' moha	Hala hughs:	(Full Address)	مكمل سنة	First	
ASYL-05	24325	(Contact Number)	راطنمير	Referee	
Dhiend	21111	(Nature of association يانوعيت with you)	آپ کے ساتھ کام ک		
Waighat Ali	1	(Full Address)	کلسل نام		
Whoo Wheli mohallah ibi	(Full Address)	مکمل بینة	دوسرا حواله	5.2	
0323-21	31516	(Contact Number)	دالطقير	Second Referee	
Abdul Basit Razai, khaskheli moha 6346-05  Friend Wajahat Ali khaskheli mohallah ibi 0323-21  Friend	(Nature of association with you)	آپ کے ماتھ کام	Referee		
Salal Rayan		(Full Name)	تكىل ئام	تنيسرا حواليه	5.3
Baloch Mohallah, ibhahi	(Full Address)	مكمل بية	Third	5.5	
0315-36733450		(Contact Number)	رابطتمير	Referee	
Salal Raga Baloch Mohallah, ibhahim hyaki 0315-3673345 Preind		(Nature of association لى نوعيت with you)	آپ کے ساتھ کام		
(General Informati			م ر د میشد	. 500 70	
No	Do you suffer from any s	ے،اگر ہاں تو تفصیل بٹائیں erious ailment or disability? If s		ليا آپ وول محد	0.1
		ر ارتبیس پائے ،اگر ہاں تو تفصیل بتا کیں or convicted for nay crime? If s		ليا آپ جھی کسی کا	6.2
No	Have you ever been tried	or convicted for nay crime? If s	o, give full details.	4600	100
No	Give any other informatio to your application	ل ایسی معلوبات جواس فارم میس موجود تی on not covered by this form which	ار خواست سے معلی کو h in your opinion i	s relevant	1 6.3
PERMANENT	If an offer is made to you, l	ہ کے لئے بلائیں ،آپ کتنے عرصہ بین r how soon can you join to us?			
60000 =	What are your salary and	benefits expectations?	اوردیگرفوا کدکی کیاامید	پ کی متو تع تنخواه	6.5
(Suitability to the Position	_عهده کی موز ونیت (on	.7			
(Briefly explain why you consider yourself suitable for the position you ha			بول اس عبدہ کے لئے	5 7 p le	7 1
My Skills sel matches all description. My ability To Time affectively make me	The Sequis	iments loud e	out in Th	e job	Ţ
نامد	درخواست گزار کا حلف				
بحی معلومات کے خلط ہونے کی صورت میں تاویسی کا روائی کی ؤ مدداری قبول کرتا رکرتی ہول I confirm and certify that the information given above is true, correct and that be subsequently discovered.					یں تصدیق
yas'		23-12-20	23	£ 6.00	

امیروار کے وستحط ...... (Candidate's Signature)

もた(Date)



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

Name of Candidate as per CNIC:	YASEEN ALI			
S/D/W of;	Ali Nu	hammacl		
CNIC NO:	4250	174623483		
Position Applied:				
Permanent address as per CNIC:	House No:  Street #:  Mohallah:  Village:  Sector/UC:  Town / Tehsil:  District	H#61  KHASKHELI Ibhahim hydri  Malik Malik		
		Malik		
Current Residential Address:	House No:			
(Kindly don't fill this section if permanent and	Street#			
residential addresses are same)	Mohallah:	Khaskheli		
	Village:	Khaskheli Ibhahim hyoki		
	Sector/UC	#27		
	Town / Tehsil:	Malis		
	District	Malik		
Signature & Date:	Date of Form Filling:	Signature of Applicant:		
	23-12-2023	Yas:		

STATE SETS
E-Calls
TRAINING &
CONSULTING

### Disclosure of Relationship Form

CONSULTING	<u>D1</u>	sciosure of iv	Clationomp 1 or			
		(To be filled	by Candidate)			22110 2
I HASE MERCHANTER STREET THE POSITION OF THE POSITION OF (Pvt.) Ltd. under	ALI SIDI Haskhedi e Sa	W/O AU Modula Auhallh Ibha District Lefy wo	e hammaol Holding thim hydri Korra 1948 Solom with	g CNIC  17.!., UC .  CHIP Tracereby decl	U2501-746	2348-3 , date .ting
sister, husband, of brother/father/n standard definition district or PTPP of 2. That, if so my employment WHO to CTC at the	wife, spouse, nother/sister- on of "blood, or CTC offices elected for thing any of my the earliest.	children, mat law or any of close relation in the same pro- is position, I sl above said re- lose relations (	other relationship  " is employed un  rovince where I ar  hall be bound to  lationship if the s  (as mentioned in a	al uncle, a which conder PTPP m candida declare - o same joins	nunt, niece, neplould come into project in the sate for this position during the course PTPP, CTC or/	the same on. see of
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.

Signature:

you;

Date: 23-12-2023

### [CTC - HRO - NI - Recruitment & Selection - 7.8.6-d-003] [Locality Verification Form – Jan 2020]



### **DECLARATION FORM**

				(TO B)	E FILLI	ED BY	THE E	EMPLOY	EE)			
Ι	YF	18te	$\sim$	AG-462348		S/D/W/	0	Ali r	101	ramma	J	holding
CNIC		425	7-10	462346	-3 Res	ident	of	Khash	thet n	nuhallah	Ibhahim	hyda
UC Emplo	yee f	or the	osition	of\$	lety	11 W9L	dan	With CHI	, P Trair	District ing & Co	nsulting (I	e <i>tx</i> Pvt) Ltc
under	its th	ird part	y contra	act for PTPI	Project,	do here	by decla	are as unde	er:			

- 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 Studen Of	Department/ Institute Name	Working as employee with (Govt/Private)	Department/ Organization name	Private business, if any	Any other part time job
1					1	1
				116.12-116.		

I do hereby solemnly affirm and declare that the information provided above is true and correct and nothing has been concealed therein.

Signature

Uasi Date: 23-12-2023



# **CHIP TRAINING & CONSULTING**

## JOINING REPORT BY A NEW EMPLOYEE

Name of the Employee	Yaseen Ali Safefy Warrolen
Position appointed to	Safefy Warrolen
Department and/or Location of appointment	Lakha Bervice Startion
CNIC#	42051-7462348-3
CNIC Expiry Date	22-03-2032
Date of Joining	09-06-2022
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	



	Bank Account Information
Name of Employee	YASEEN ALI
Designation	Saffy waspen
Union Council / Area	Ibsahim hydsi
District / Agency	Saffy wasolen Ibsahim hydsi Malis
Contact No.	0306-2851287
CNIC No.	42081-7462348-3

Bank Account Title	YASEEN ALI
Bank Name	MCB
Bank Address	Korangi industrial area
Bank Branch Code	1271
Bank Account Number (With IBAN)	1447991811005541

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.

yasi

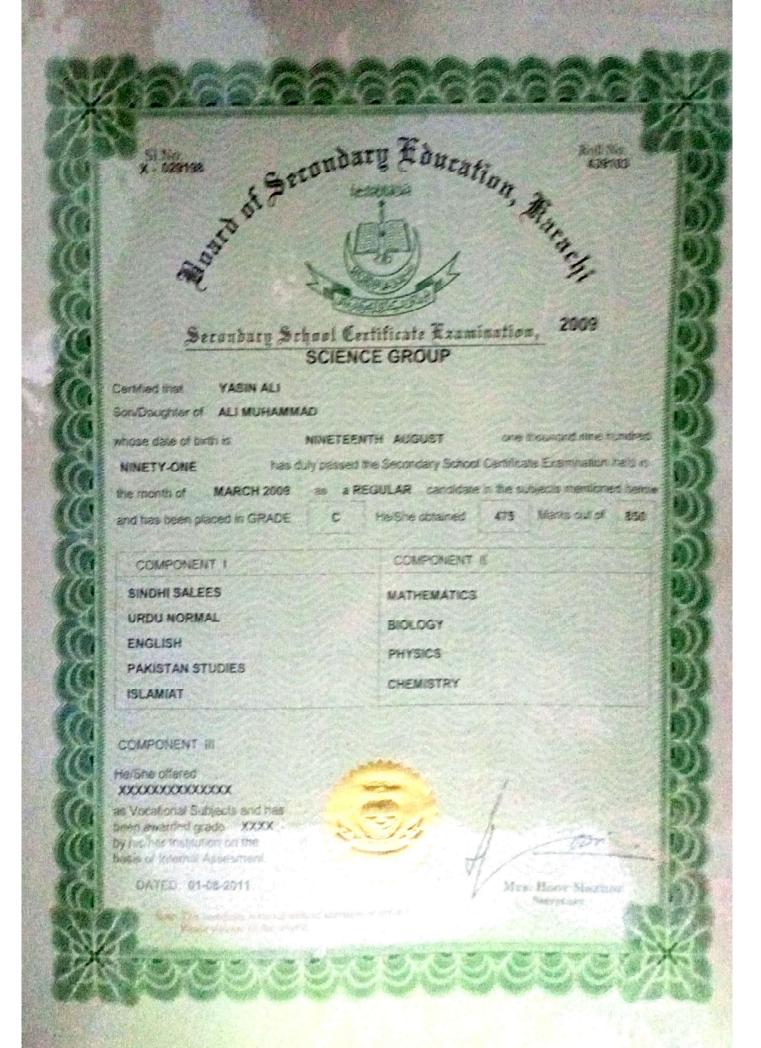
Employee Signature (Mandatory)

Employee Thumb Impression (Mandatory)

Dated: 23-12-2023

Note:

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



The Pakistan Citrenship Act, 1951 (II of 1951) and rules made thereunder (Vide Rule 23)

Whereas YASIN ALI S/o -45/67/W/6X ALI DHA MAD
(In black letters)
has applied for a certificate of a 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 Act for the grant of a certificated of domicile
A CASIN ALL Case.
Now therefore, in pursuance of powers conferred by said Act and rules the made threunder,
the undersigned hereby grants to the said YASIN ALI
this certificate of domicile.
In witness whereof I have subscribed my name this day of
Signed
White Titled
To lexignation
DEL ATING TO THE APPLICANT
PARTICULARS RELATING TO THE APPLICANT
Full Name YASIN ALI
THE REPORT OF THE PARTY OF THE
Father's Name ALI MURASHAD PARA, IBRAHIM HYDERI, BIN GASIM TOW Address in Pakistan No. 61, KHASKHELI PARA, IBRAHIM HYDERI, BIN GASIM TOW
Place KARACHI Tehsilo III Gabili I I IIII
Place of domicile Prov./Admn.SINDH BY BIRTH (19.12.1991)  Date of arrival in the Place of domicile ST N G L E
Widow / Widow
Name of wife or husband N I L
Name of children and their ages
Name of Children and their g
0.00
fred the Celegan July in
Malin Journey
18 19 1
STUDENT/ JOBLESS. KOP SCHOOL
Trade or Occupation STUDENT/ JOBLESS. FOR STATES
Marks or Identification
N.I.C. No. 430)
10 (0)
Naroco / S
Designation 2x 2007
Place KARACHI



# PAKISTAN National Identity Card

SLAMIC REPUBLIC OF PAKISTAN

Name Yaseen Ali











All Muhammad





42501-7462348-3 Identity Number

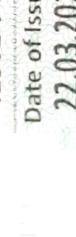
Date of Issue 22.03.2022

19.12.1991 Date of Birth

Date of Expiry 22.03.2032







مريون بية : يحلّم عالي يازه ايرائي حيدى، كور كى كريك كذب تحييل لير، خلح كرايي لير

يتن بيز على عائده إبرائيم حيدى، كور عى كريك كين بيز على عيس ميس خطع كرايي ميس

509951014010

يتره کارڈ ملنا پر ترجی لیڈ ملب میں ڈال دیں