### 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 constructed as a gross misconduct, liable to be punished by instant dismissal and other disciplinary action as may be appropriate to the nature of misstatement.



	رزاتی معلومات (Personal Information) براول 41102-3353521-9	آمکن نام (Full Name) شاختی کاردٔ کافیم (CNIC No.) شاختی کنر فتی فتی فیم (شاختی کارز میمرینه جون کی صورت میں ) برگیرشاختی فیم فیمرین میں (Other Identification number it CNIC) is not available )	1.1
		شافتی کارڈ کافیبر ( CNIC No ) . بگرشافتی نبر (شافتی کارڈ بمیسر نہ ہونے کی صوبت میں ) ( Other Identification number it CNIC	
		دیگرشاخی نبر( شاختی کارذ میسر ند ہونے کی صورت میں ) Other Identification number if CNIC)	1.3
		(Other Identification number it CNIC is not available)	
	10-12-1999	(Date of Birth (مال رمبية برن ) (۲۲۲۲/MM/DD)	1.4
	دن مبید: سال معلوم سیب مرف سال معلوم ہے یا تاریخ پیدائش معلوم میں اللہ (Day, Month,	ا کرنگ پیدائش کا جائزه کیل ( کن ایک پرنشان کا کمی ) (Tick any One) (Check DOB)	1.4.1
	Mentioned) (Only Year available)  Year Available)	(Father's/Husband Name/ الدرشويرافوني وشوارهام Name of i.e. Next Kin)	, 1.5
	والد	یدوارکے ماتھ رشتہ (Relationship with Applicant)	1.6
	منير سادى شدى	(Marital Status) وافي مثيت	اڑو
	(M) (a) 2/2	(Gender)	
	Piw	(Tribe)	1.7 ني
	(6) prize	(Ethnicity)	ذا <b>ت</b>
	المراعدة) بالمرابع المرابع الم المرابع المرابع الم	(Language)	نبان
	H.NO-1-4Th floor Mees Balowh ro South Karachi UC-06	(Permanent Address) = ج (District and Union Council)	1.8 خلماه
, .	South Karachi UC-06	(Present Address)	1.9° 1.9°
مداری لرح	South Rasalle OC - S. N. S. M. J. Hhylos C. L. N. S. M. J. Hhylos C. L. N. S. M. J. M. J. M. J. M. (Office) (E-mail) (Office) (Grail) (Office) (T. J. 200.)	نسيل (Contact Detail)	ر. 2 رابط م <sup>ا ا</sup>

# (Qualification) تعليمي قابليت

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

تمام تعلیمی و تمثیل قابلیت کی اساد کی فہرست تکھیں (میڈک سے شروع کریں)

گریمُزویژن (Grade/Division)	ertificate (Matricu انهم مضاین (Major Sub)	ects)	رماصل کردو ( <sup>د</sup> گری Certificat) Degree Obta	e/ ined)	اوار و (Institution)	(Year)	
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	(Prese	nt Emplo	ازمت (syment	موجوده ما	.3		1
Sive details of your pre	sent employment	(If you ar	e currently unemp	loyed.	ته ما زمت وَ آنهیلات فراہم ریں	لحال بروزگار بین اقو نُز شه 	اگرآپ في ا
give these details	in respect of the in	ist employi	ment to the second	براوا	(Name of Employer)	75.833	3.1
					(Employer's Address)	أجر كأعمل بية	3.2
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	_ oag	ely	Marde dling	nv	(Main Duties)	البم ذمه داريال	3.5
Bike/Rik	ghaw S	1800	de la	1	(Name & Title of your Immediate Boss)	مجازآ فيسركانا ماور مبدو	3.6
			34000		(Gross Monthly	مجموقی ماہانہ عبدو (روپ	3.
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ive details of 3 references not related to you by blood or marriage والمنت الله و the can vouch for your character and work experience	پ کارداراورکام کے جرے ہے	ماخونی یا شاه دی سے دیو سے زیرہ بلکہ جوا	نه دین جن کا معل اب سائم	م نين(٣) نواله ب	آپ تم از آ 
on the contract and axis experience	Ntu	(Full Name)	تحسل نام	بهادواله	
// A 511 ./ .	11:11.	(Full Address)	محمل دو	First	
4-No-1, Sth. floor Nayabad Near 0321-38	ALL hold	(Contact Number)	را <u>دا</u> نم.	Referee	
0321-38	34107	(Nature of association with you)	آپ کے ساتھ کام ک		
Gollogn	Olyper	(Full Address)	تكبل نام		
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3. + for Man 2 Marcal No	Rounz h	defull Address)	للمل بالأ	Third	
9. f/coo H.No.2, Moosalane No 0301-030	20245	(Contact Number)	والطائم	Referee	
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	ا پائل ماعظ رحی ہیں۔	م عنوهات بوال فارم يكن مو بودنيك ation not covered by this form	which in your opini	on is relevant	7 0
M/A	to your application				
. 1	ب ما تھا م کر کے ہیں؟	ئے باا کی ا ب کے اصری عار .	ے جمہالا کیا گے کے	آپ کو ہے ادار	6,1
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بچی معلومات کے فاط ہونے کی صورت میں تادیبی کاروائی کی فرمدواری قبول کرتا مرکر تی	ت اور مثل ہیں، بعد جس کے	بمراه ربعین کے جن مطابل پی ۱۰رم	ق تمار معلومات مير 🗕	ول كواويدق	بارجاري
infirm and certify that the information given above is true, correct and o	complete to the best of	my knowledge and belef. I a	cept responsibility	for any miss	tatement
it be subsequently discovered.				g	
Lod Fred		22 12	2-2		
ميدوارك وشخط		22-12-	aoa.	<u>ئ</u>	C(Date)
(Candidate's Signature	e)				



# 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:	Bilawal	
S/D/W of;	Bilawal	
CNIC NO:		0233535219
Position Applied:		
Permanent address as		
per CNIC:	House No:	01/04
	Street #:	09
	Mohallah:	Nayabad
	Village:	
	Sector/UC:	06-UC
	Town / Tehsil:	Saddas Town (South Karachi)
	District	Saddas Town (South Karachi) South Karachi
Current Residential Address:	House No:	01/20
(Kindly don't fill this	Street#	01
section if permanentand residential addresses are same)	Mohallah:	Ismail Rahookaro Tasai
	Village:	Badin (Tavai)
**************************************	Sector/UC	Ismail Rahookaro Tasai Badin (Tasai) Tasai
	Town / Tehsil:	Tasai
	District	Badin
ignature&Date:	Date of Form Fillin	
- Januare Control	22-12-20	

TRAINING	2.0
CONCHIA	200
CONSULT	ING

### Disclosure of Relationship Form

	(To be filled by Candidate)	
1 Bilawal	(To be filled by Candidate)  (To be filled by Candidate)	<b>X</b> -
Resident UC06	of Mees Malammad Isabetan Constitution of Candidate for the position of Child Training & Consulting (Pvt.) Ltd. under its	
CAFFILL	Day on with Critician of	
third party contrac	or 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/Distric t	UC	Relationship
			,		/
			1		1
				-	

**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:

### DECLARATION FORM

CONSULTING	(TO BE FILLED BY THE EMPLOYEE)
Bila	sol (TO BE FILLED BY THE Learner holdin
CNIC 411	(TO BE FILLED BY THE EMPLOYER)  S/D/W/O  2-3353521-9 Resident of Meet M. Baloush soad Near Youth Mule  Tehsil Saddas District South (Sarah Employee for Safety Mardow With CHIP Training & Consulting (Pvt) Ltd under its thir
the position of	or 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
	/					

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

### TRAINING & CONSULTING

Bank Account Information				
Name of Employee	Bilawal			
Designation	Safety Warden UC.06-Town Saddas			
Union Council / Area	UC.06 - Town Saddas			
District / Agency	South Karachi			
Contact No.	0326-3253592			
CNIC No.	41102-3353521-9			

Bank Account Title	13ilawal
Bank Name	MCB limited
Bank Address	Main Timber Market Siddique Wahab road
Bank Branch Code	0006-
Bank Account Number (With IBAN)	1446 6341 3100 2980

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: 22-12-2023

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	Bilawal
Position appointed to	Safety Warden
Department and/or Location of appointment	Miskeen Petrol Servicee
CNIC#	41102-3353521-9
CNIC Expiry Date	09-08-2028
Date of Joining	09-June - 2022
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	



	CHIP Tra	ining & Consulting (Pvt) Ltd	
	Huma	an Resource Department	
	D	ocuments Check List	
Designation	Satety	Watnen.	
Name of Employee	Bilawa	Focal Person for file management	41102-33535219
Area/ Site	Miskeen	CNIC No	91162 3333501
Date of Joining	09-7une-	Resignation	

S No:	Documents	If Received ( 🗸 )	Remarks (If Any)
1	Academic Credentials (verified by HEC)		
2	Experience Certificates		
3	Resume		
4	Employment Form		
5	Kinship Form		
6	Physical Verification Form		
7	Education and Dual Job Verification form		
8	Bank Detail Form		
9	Contract Letter In Hard Copy		
10	Security Clearance Form (If Applicable)		
11	Copy Of CNIC		
12	Passport size Photograph		
13	Sops Acknowledgement Form		
14	Joining Form		
,	35		

# Moard of Intermediate & Secondary Education Hyderabad, Sindh

Excellence-Equity-Empathy

Certificate No. 442178





Seat No. 119241

Secondary School Certificate Examination

Annual/Supplementaryxx 2016

lame of Institution: 576	- GOVT: BOYS HIGHER S	ECONDARY SCHOOL	GOLARCHI
assed Secondary Scho	ool Certificate (Part-	II) Examination he	eld in the month
f_MARCH 2016	_and secured Grade _		
omponent I	Component II		Component II
Urdu & Sindhi Salees	Science Group  1. Physics	General Group  1. General Science	Secured Gradein the following
Linginoiri Cari	2. Chemistry	2. General Mathematics	and the same of th
r akistan otdates	3. Mathematics	3	ATT AND ADDRESS OF THE PARTY OF
The state of the s	4. Biology/Computer Science	4.	
he Date of Birth as recorded i	in the Examination Form is	(in figure)10-12-	1999
n words) TENTH DI	ECEMBER NINTEEN	HUNDRED NINTY	NINE ONLY.
he examination was taken as	a whole/ in parts.		

05-10-2018. Dated\_ Hyderabad, Sindh

Controller of Examinations

Secretary 

# FORM "D"

### **SEE RULE 5 (1) (b)**

CERTIFICATE OF PERMANENT RESIDENCE IN PROVINCE OF SINDH FOR THE PURPOSE OF RECRUITMENT IN PUBLIC SERVICE IN SINDH.

# CERTIFICATE OF PERMANENT RESIDENCE

I, hereby certify that for the reason given below:

FULL NAME: <u>BILAWAL</u> S/O <u>LEEMON</u> Her/his permanent residence in Village/Town: <u>ISMAIL RAHOOKARO, GOLARCHI</u>, Taluka <u>S.F. RAHU</u>, District <u>Badin</u> in the Province District of Sindh. This Certificate is granted for the purpose of recruitment in Public Services in Sindh.

### HERE ENTER REASONS

The applicant is permanent resident of Village /Town: ISMAIL RAHOOKARO, GOLARCHI, Taluka S.FRAHU, District Badin.

No. 397 of 2019.

Badin, Dated: 11 / 04 /2019.



### FORM "C"

CERTIFICATE OF PERMANENT RESIDENCE IN PROVINCE OF SINDH FOR THE PURPOSE OF ADMISSION TO ANY EDUCATION INSTITUTION AS SPECIFIED IN RULE 2 (A) OF THE SINDH PERMANENT RESIDENCE CERTIFICATE RULES-1971

### CERTIFICATE OF PERMANENT RESIDENCE

I, hereby certify that for the reason given below:

FULL NAME: <u>BILAWAL</u> S/O <u>LEEMON</u> Her/his permanent residence in Village/Town: <u>ISMAIL RAHOOKRO, TALUKA GOLARCHI</u>, TALUKA <u>S.F RAHU</u>, District <u>Badin</u> in the Province District of Sindh. This certificate is granted for the purpose of Admission to any Educational Institutes in Sindh.

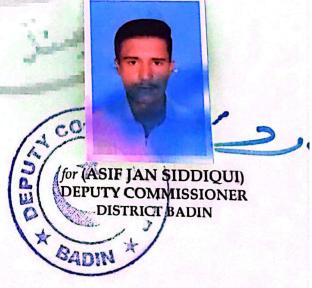
### HERE ENTER REASONS

The applicant is permanent resident of Village /Town: ISMAIL RAHOOKRO, Taluka: S.F RAHU, District: BADIN.

Date of Birth: 10-12-1999.

No. D C/G.B/C (PDN)/- 532/2018.

Badin, Dated: 01/8/2018.



### APPENDIX (XIV)

THE PAKISTAN CITIZENSHIP ACT 1951 (II OF 1951) & RULES MADE THERE UNDER (VIDE RULE 23)

### Form "P-I"

## CERTIFICATE OF DOMICILE

Whereas, <u>BILAWAL</u> S/O <u>LEEMON</u> applied for a certificate or domicile under the Pakistan Citizenship Act (II of 1951), alleging with respect of himself / herself the particulars set out below, and has satisfied the undersigned that the conditions laid down in Section 17 of said act for the grant of Certificate of Domicile are fulfilled in the said case of <u>BILAWAL</u> S/O <u>LEEMON</u>.

Now, therefore in pursuance of the powers conferred by the said Act, and rules, made thereunder, the undersigned hereby grant to the said <u>BILAWAL</u> S/O <u>LEEMON</u>, this Certificate.

In witness whereof I here-to subscribed my name this day of Jul

No .Reader Domicile/ (SFR)

357/012018

Shaheed Fazil Rahu dated: O1 / 8 //20

for (ASIF JAN SIDDIQUI)
DEPUTY COMMISSIONER
DISTRICT BADIN

### PARTICULARS RELATING TO THE APPLICANT

**FULL NAME:** 

BILAWAL S/O LEEMON

Address in Pakistan:

VILLAGE ISMAIL RAHOOKRO, TALUKA GOLARCHI

Address in the Country outside Pakistan:

NIL

Place of Domicile:

TALUKA: S.F RAHU, DISTRICT: BADIN. PROVINCE OF SINDH

DATE OF BIRTH:

10-12-1999

Date of Arrival in the Place of Domicile:

SINCE BIRTH

Married/ Single/ Widow/Widower:

SINGLE

Name of Wife or Husband:

MOLL

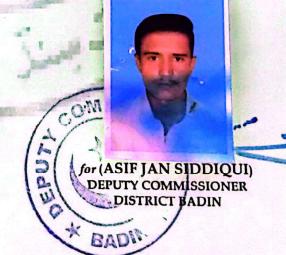
Trade of Occupation:

STUDENT

Mark of Identification:

PHOTO AFFIXED

Name of children and their ages:



G.R. No. 980

# School Leaving Certificate

	Date: 21-01-2019
1.	Name of Student Bilawal
2.	Father's Guardians Name Leemon
3.	Caste Maheshwari 4. Religion Hindu
5.	Place of Birth Union Council Tarai Taluka Golarchi
115	Date of Birth in Figures 10-12-1999 7. (in words) Tenth December N/H Ninety Nine
6.	Last School attended Noor Public High School Shaheed Fazal Rahu (Golarchi) Disti Badin
8.	
9.	Date of Admission 12-08-2016 10. Class in which admitted XI (PF) HSC I
11.	Progress Good 12. Conduct Good
13.	Date of Leaving Schools 30-06-2018
14.	Class in which Studying Passed HSCII P/E A/E 18 U/S No.97302 in Grade "B"
15.	Reason for leaving the School Completed Higher Secondary Education
16.	Remarks LC Issued Hierard
Cer	tified that the above information is in accordance with the School Register
	Class Teacher Principal
el I	PRINCIPAL
1	Progressive Public School
	Badin



# PAKISTAN National Identity Card

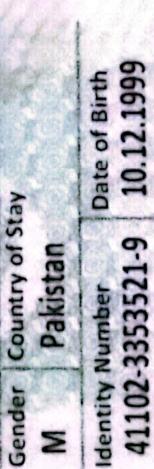
SLAMIC REPUBLIC OF PAKISTAN

Bilawal



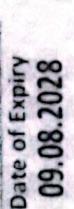
Father Name Leemon





Pakistan

41102-3353521-9



Date of Issue 09.08.2018



Holder's Signature

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الله عن الما الما يمي راي الله والله خالد ترايي المين المعيد

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Varman Y, Moteun

Registrar General of Pakistan

كم تيل كارد ملن تي ويجهي پيال جي ديي به وجهو