

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 misstatement, liable to be punished by instant dismissal and other disciplinary action as may be appropriate to the nature of the statement.

صرف آخری سوال کے لیے (کی ٹی سی سٹاف کی جانب سے پُر کیا جائے گا) (For official use only to be filled by CTC Staff)

مہمہ: ام جس کے لئے درخواست دی گئی۔ (Position applied for)
تعمیر ہونے پر ترقیاتی تربیت کی تاریخ (سال/مہینہ/دن)
(Expected Date of Induction Training if selected)

1۔ ذاتی معلومات (Personal Information)	
MUHAMMAD BURHAN BAIG	1.1 مکمل نام (Full Name)
42401-2671081-7	1.2 شناختی کارڈ نمبر (CNIC No)
-	1.3 دیگر شناختی نمبر (شناختی کارڈ نمبر نہ ہونے کی صورت میں) (Other Identification number if CNIC is not available)
1988/06/05	1.4 تاریخ پیدائش (سال/مہینہ/دن) (Date of Birth (YYYY/MM/DD))
<input type="checkbox"/> تاریخ پیدائش معلوم نہیں (DOB not Mentioned) <input type="checkbox"/> صرف سال معلوم ہے (Only Year available) <input checked="" type="checkbox"/> دن، مہینہ، سال معلوم ہے (Day, Month, Year Available)	1.4.1 تاریخ پیدائش کا جاننا (کسی ایک پر نشان لگائیے) (Check DOB) (Tick any One)
MUHAMMAD AFZIKHAR BAIG	1.5 والد/شوہر/آخری رشتہ دار کا نام (Father's/Husband Name/ Name of i.e. Next Kin)
FATHER	1.6 امیدوار کے رشتہ دار (Relationship with Applicant)
MARRIED	1.7 ازدواجی حیثیت (Marital Status)
MALE	جنس (Gender)
-	قبیلہ (Tribe)
URDU SPEAK BAIG	ذات (Ethnicity)
URDU	زبان (Language)
SAFIY PLAZA FIAI A-6 GARDEN WASTI KHI	1.8 مکمل پتہ (Permanent Address)
SOUTH	ضلع اور یونین کونسل (District and Union Council)
SAFIY PLAZA FIAI A-6 GARDEN WASTI KHI	1.9 موجودہ پتہ (Present Address)
فون (Residence) 0311-99149112 (Mobile) فون (Contact Detail)	2.0 رابطہ تفصیل (Contact Detail)
Burhan Baig 117 A (E-mail) 0533-2949112 (Office) فون (Contact Detail)	2.1 آخری تعلیمی سند (Last Qualification)
2005	

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 (میٹرک سے شروع کریں)

گریڈ/ڈویژن (Grade/Division)	اہم مضامین (Major Subjects)	سرٹیفکیٹ حاصل کردہ ڈگری (Certificate/ Degree Obtained)	ادارہ (Institution)	سال (Year)
MATRICULATION	ENGLISH, URDU ISLAMIC SCIENCE	2004	Pink Grammar SECONDARY SCHOOL	2004
INTERMEDIATE	P. STUDIES MATHEMATICS	2007	S. RAJ - U-7 AVDAH COLLEGE	2007

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

MUHAMMAD BURHAN BAIG	(Name of Employer)	آجر کا نام	3.1
SAFETY PLAZA FLAT A-6 GARDEN WAZI KHI	(Employer's Address)	آجر کا مکمل پتہ	3.2
2021	(Date of Joining)	تاریخ تہنیتی	3.3
SAFETY SPECIALIST 2023	(Your Last Job Title)	آخری عہدہ	3.4
BIKE STRADDLING, RICKSHAW STRADDLING	(Main Duties)	اہم ذمہ داریاں	3.5
BAEKAT ALI	(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

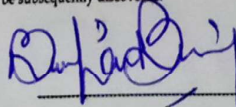
اہم ذمہ داریاں (Main duties performed by you)	عہدہ آخری عہدہ جب ملازمت چھوڑی (Position held by you when you left this employer)	آجر کا نام اور پتہ (Employer's Name & Address)	دورانیہ دن - مہینہ - سال - تا دن - مہینہ - سال (From/To) (D/M/Y to D/M/Y)
ORDER BOOKER	2020	PEPSI & CO	2019 to 2020

5-حوالہ جات (References)			
آپ کے اذکار میں (3) حوالہ جات دیں، جن کا تعلق آپ کے کسی خونی یا شادی سے لے کر رشتہ سے نہ ہو، بلکہ حجاب 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 First Referee	کامل نام (Full Name) کامل پتہ (Full Address) رابطہ نمبر (Contact Number) آپ کے ساتھ کام کی نوعیت (Nature of association with you)	GHULAM HAIDER KHAN SAIFY BUILDING, FLAT NO 42 GARDEN WEST 0311-2703987 CLOSE FRIENDS.
5.2	دوسرا حوالہ Second Referee	کامل نام (Full Name) کامل پتہ (Full Address) رابطہ نمبر (Contact Number) آپ کے ساتھ کام کی نوعیت (Nature of association with you)	M. SHOAB SAIFY PLAZA FLAT A-22 GARDEN WEST KHAN 0311-8452075 NEIGHBOUR
5.3	تیسرا حوالہ Third Referee	کامل نام (Full Name) کامل پتہ (Full Address) رابطہ نمبر (Contact Number) آپ کے ساتھ کام کی نوعیت (Nature of association with you)	GHULAM HAIDER R399 SECTOR 15/A2 BUFFER ZONE 0345-3291216 FRIENDS.

6-عمومی معلومات (General Information)	
6.1	کیا آپ کو کوئی معذوری یا بیماری تو نہیں ہے، اگر ہاں تو تفصیل بتائیں Do you suffer from any serious ailment or disability? If so, give details.
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.
6.3	آپ کے خیال میں درخواست سے متعلق کوئی ایسی معلومات جو اس فارم میں موجود نہیں آپ میں بتا سکتے رہتی ہیں۔ Give any other information not covered by this form which in your opinion is relevant to your application
6.4	اگر ہم آپ کو اپنے ادارے میں کام کرنے کے لئے بلائیں، آپ کتنے عرصے میں ہمارے ساتھ کام کر سکتے ہیں؟ If an offer is made to you, how soon can you join to us?
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)	
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).	

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.


امیدوار کے دستخط
(Candidate's Signature)

22/12/2023
تاریخ (Date)



Disclosure of Relationship Form

(To be filled by Candidate)

I M. BUKHAN BAIG, S/D/W/O M. IFTIKHAR BAIG Holding CNIC
42401 SAFI PLAZA FLAT A-6, Resident of SAFI PLAZA FLAT A-6 GARDEN WEST KH.
96710817 UC 2, Tehsil KARACHI District
SOUTH Candidate for the position of
SAFETY SPECIALIST 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: M. Bukhan Baig

22/12/2023

Date:



DECLARATION FORM

(TO BE FILLED BY THE EMPLOYEE)

I M. BURHAN BAIG, S/D/W/O M. IFTIKHAR BAIG holding
CNIC 42401-2671081-7, Resident of SAFI PLAZA FAF AG CADETS NUTRI UC
DC-2, Tehsil KARACHI, District SOUTH Employee for
the position of SAFETY SPECIALIST 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

22/12/2023

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:	MUHAMMAD BURHAN BAIG	
S/D/W of;	MUHAMMAD SHIKHAR BAIG	
CNIC NO:	4 2 4 0 1 2 6 7 1 0 8 1 7	
Position Applied:	SAFETY SPECIALIST	
Permanent address as per CNIC:	House No:	A-6
	Street #:	GARDEN ZOO OPPOSITE
	Mohallah:	SAFETY PLAZA
	Village:	-
	Sector/UC:	UC-2
	Town /Tehsil:	KARACHI
	District	KARACHI SOUTH
	Current Residential Address: <i>(Kindly don't fill this section if permanent and residential addresses are same)</i>	House No:
Street#		GARDEN ZOO OPPOSITE
Mohallah:		SAFETY PLAZA
Village:		-
Sector/UC		UC-2
Town /Tehsil:		KARACHI
District		SOUTH
Signature & Date:		Date of Form Filling: 22/12/2023



Bank Account Information	
Name of Employee	M. BURHAN BAIG
Designation	SAFETY SPECIALIST
Union Council / Area	UC-2 GARDEN WEST
District / Agency	KARACHI
Contact No.	0311-9949112
CNIC No.	42401-2671081-7

Bank Account Title	M. BURHAN BAIG
Bank Name	MCB MUSLIM COMMERCIAL BANK
Bank Address	HAZIMABAD NO 2 INQUIRY OFFICE
Bank Branch Code	1249
Bank Account Number (With IBAN)	1446268501005013

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	MUHAMMAD BURHAN BAIG
Position appointed to	SAFETY WARDEN AND SAFETY SPECIALIST
Department and/or Location of appointment	CENTRAL SERVICE STATION BESTWAY SERVICE STATION CLASSIC FILLING STATION SPL AMPL SERVICE STATION
CNIC#	42401-2671081-7
CNIC Expiry Date	18/09/2028
Date of Joining	2021
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	