

Disclosure of Relationship / Kinship Form

(To be filled by Employee)

I MUHAMMAD AFZAL S/D/W of GHULAM NABI, holding CNIC:
3440216556683 designated as _____ at (city/district & Province)

ISLAMABAD with CHIP Training & Consulting (Pvt.) Ltd. (CTC),

do hereby declare as:

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, father/mother/sister-in-law or any other relationship which could come under the standard definition of "blood/close relations" is employed at CTC/Client's office
2. That, I shall be bound to declare - during my course of employment - if any of my above mentioned relationship is appointed at CTC/Client's office.
3. The following blood/close relation (as mentioned in the Article - 01 above) is employed in CTC.

Sr.No	Name	Designation	Organization	Dist./Province	Relation
	✓				
	✓				
	✓				

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

Signature

Afzal