[CTC - HTO- PTPP - Recruitment & Selection - 7.8.5-c-030] [job Application Form - Jan 2020]

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.

Affix a recent passport sized Colour photograph here

صرف دفتری استعال کے لئے (سی ٹی سٹاف کی جانب ہے مجراجائے گا) (For official use only to be filled by CTC Staff)

(For official use only to be filled	متعال کے لئے (ی تن می ساف کی جانب ہے مجراجائے گا) (by CTC Staff	صرف دفتر گا
110813033	س کے لئے درخواست دنگ گئ: (Position applied for) ۔۔۔۔۔۔ پرتعیناتی تربیت کی متوقع تاریخ: (سال رمبینه بردن) (Expected Date of Induction Training it	منتخب ہونے
زاتی معلویات (Personal Information)	_1	
Saliad Hussain	(Full Name) ملل نام	1.1
32403-8681645-5	شناختی کارڈ کانمبر (:CNIC No)	1.2
	ویگرشاختی نمبر(شاختی کارؤمیسریتہ ہونے کی صورت میں) Other Identification number if CNIC) is not available)	1.3
1993/01/13	(Date of Birth (مال رمبييدائش (سال رمبييدرون) (YYYY/MM/DD)	1.4
ان مبینہ سال معلوم ہے کے تاریخٌ پیوائش معلومُ نہیں (DOB not (Only Year available) (Day, Month, Mentioned)	تارخ پیدائش کا جائزه لیس (کس ایک پرنشان لگائیں) (Check DOB) (Check DOB)	1.4.1
Manzoor Ahmaid	(Father's/Husband Name/ والدراثو بررخونی رشته دار کانام Name of i.e. Next Kin)	1.5
Father	امیدوار کے ماتھ ورشتہ (Relationship with Applicant)	1.6
Married	(Marital Status) از دوا جي حيثيت	
Mode	(Gender)	
	(Tribe)	1.7
Bohar	(Ethnicity) زات	
Urdu, English, Soaki	(Language) زبان	-
Fisal Clony Rajon Pur Shoryi	(Permanent Address) ممل پية	4.0
Raianpur Sharyi	ضلع ايونين أنسل (District and Union Council)	1.8
Rajanpar Sharri Fisal Clorry	(Present Address) جرجودية	1.9
(Residence) المجام (Mobile) المجام (Shb55557@gmail) (E-mail) المجام (Office) المجام (Office) (Residence) المجام (Office) المجام (Description of the state of the	(Contact Detail) رابطه کا تفصیل	2.0
M. Phil	(Last Qualification) آخری تعلیمی سند	2.1

[CTC - HRO - PTPP - Recruitment & Selection - 7.8.5-c-030 [Job Application Form - Jan 2020

(Qualification) عليي قابليت

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

تمام تعلیمی تکنیکی قابلیت کی اسناد کی فہرست گھیں (میٹرک سے شروع کریں)

گریڈرڈویٹرن (Grade/Division)	ا ټم مضايين (Major Subjects)	ىرشىنىكىيەن رھامىل كرودۇگرى /Certificate Degree Obtained	اوارو (Institution)	بال (Year)
А В А	Scince Phy, Ch, Modh Environmental Scin Environmental Scin	Matric FSC BS M. Phil	BISE Dak BISE Dak GCUF UOL	7010 9017 9016 9077

(Present Employment) موجوده ملازمت				
(Give details of your present employment. (If you are currently unemployed, give these details in respect of the last employment held by you).	بے روز گار بیں، تو گزشتہ ما زمت کی تفصیلات فراہم کریں	اگرآپ في الحال		
WHO	(Name of Employer)	3.1		
	(Employer's Address) جرياً کمل پية	3.2		
01/02/2021	(Date of Joining) تاریخ تعیناتی	3.3		
ucst	(Your Last Job Title) آخری عبده	3.4		
Polio Comparan manadring	(Main Duties) الهم ذمه داريال	3.5		
Dr Gal Badeen	(Name & Title of your کانام اور نبهده Immediate Boss)	3.6		
30000	(Gross Monthly (روپے میں) Pay)	3.7		

(Pasi	ربہ (Work Experience	4-سابقه کام کاتج	
(List all the previous jobs held by you, s	tarting from the earliest).	ی کی تفصیل، آخری ملازمت ہے شروع کریں	آپ کی تمام سابقه ملازمتوں کی فہرست
ا تم ذمداریال (Main duties performed by you)	عهده آخری نبده بب ما زمت تیجوژی (Position held by you when you left this employer)	آج/کانام/اور پنة (Employer's Name & Address)	دورانی دن-بینه-سال تادن-بمینه-سال (From/To) (D/M/Y to D/M/Y)
Polio Compagn Monatry	ucpo	шно	1/4/17 To 31/1/19
Polic Compagn Monten	[®] UCPO	CTC	1/2/19/028/2/21
Polioc Campaign Mondin	" UCSP	MHO	1/3/21 To Presen

ج-حواله جات (References)			
Give details of 3 references, not related to you by blood or marriage, وأب كرداراوركام كر قرب التعام كرداراوركام	دیں، جن کا تعلق آپ کے کئی خونی یا شادی ہے جڑے رشتہ سے نہ ہو، بلکہ ج	نمن(۳) حواله جات	آپگمازگم:
Dr Yasir Namaz	(Full Name) المكن الم	مبلاحواليه	5.1
Dak Dirision	(Full Address) تکمل بیته	First	
03007396568	(Contact Number) رابط نمبر	Referee	
Area Coordinator	(Nature of association پنجه کرار کی او عیت سند کام کی نوعیت with you)		
Do Fayyaz Sabwar	(Full Address) الملنام		
Foislabad Dirison	(Full Address) ممل بينة	دوسرا حواله	5.2
03814689036	(Contact Number) رابط نمبر	Second	
Area Coordinator	(Nature of association with you) آپ کے ساتھ کام کی نوعیت	Referee	
Dr Ammar Shah	(Full Name) من ملنام		
Dak Duson	(Full Address) تمكن يبتة	تيسرا حواله د	5.3
0333-6488033	(Contact Number) رابطه نور	Third Referee	
Divisonal EPI officer	(Nature of association پُ کے ساتھ کا م کی انوعیت with you)		

(General Information) عمومي معلومات - 6					
NO	6.1 کیا آپ کوکوئی معذوری پاییاری تونتیس ہے،اگر ہاں تو تفصیل بتا نمیں Do you suffer from any serious ailment or disability? If so, give details.				
NO	6.2 کیا آپ بھی کسی کام کے سلسلے میں مجرم تو تر ارتبیں یائے،اگر ہاں تو تفسیل بتا نمیں Have you ever been tried or convicted for nay crime? If so, give full details.				
No	ا کے خیال میں درخواست مے متعلق کوئی ایس معلومات جواس فارم میں موجوز میں آپ جمیس بتا سکتے رسکتی ہیں۔ Give any other information not covered by this form which in your opinion is relevant to your application				
As Obganzation Demand	اگرہم آپ کو ہے ادارے میں کا م کرنے کے لئے با نمیں ،آپ کتنے عرصہ میں ہمارے ساتھ کا م کر سکتے ہیں؟ If an offer is made to you, how soon can you join to us?				
55900	6.5 متوقع تنخواه اورد گرفوائد کی کیاامیدر کھتے ہیں؟ What are your salary and benefits expectations?				

ورخواست گر ار کا حلف ٹا مہ میں تقد بین کرتارکرتی ہوں کیاو پردی گئی تمام معلومات میرے ظم اور لیفین کے تین مطابق کچی، درست اور کمسل میں، بعد میں کہ بھی معلومات کے غلط ہونے کی صورت میں تاد جبی کا روائی کی ذمداری تبول کرتا رکرتی ہوں۔

I confirm and certify that the information given above is true, correct and complete to the best of my knowledge and beleif. I accept responsibility for any misstatement that be subsequently discovered.

امیدوار کے دشخط (Candidate's Signature) 21/07/2022 Ext (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:	SAJJAD HUSSAIN				
S/D/W of;	MANZOOR AHMAD				
CNIC NO:	3240386816455				
Position Applied:	UCPO				
Permanent address as per CNIC:	House No:				
	Street #:				
	Mohallah:	-			
	Village: Ray	tha Naseel			
	Sector/UC: Nour Pub Machiwa				
	Town / Tehsil: Ra	Jan Pul			
	District	Rajan Pub			
Current Residential	TI				
Address:		· Malik House			
(Kindly don't fill this section if permanent and	Street# Pan	Jab Cotton Factory			
residential addresses are same)	Mohallah.	ial Colony			
	Village:				
Sector/UC Raianpus Sharyi					
	Torum /Tobail.	Infinois			
	District Rajan Pul				
Signature & Date:	Date of Form Filling:	Signature of Applicant:			
	21/07/2022 ASI				



Disclosure of Relationship Form

(To be filled by Candidate)

3%			with C	Man Zoos. Colony P Tehsil Rajan Candidate for CHIP Training & Ceby declare as und	Consulting	Holding Cl Coffee Factorium, Dis- position (Pvt.) Ltd. unde	NIC tric of	
	sister, husband, brother/father/r standard definiti district or PTPP of 2. That, if so my employment WHO to CTC at 3. The follow	wife, spouse, mother/sister- ion of "blood or CTC offices elected for the carliest. wing blood/c	children, mather children, mather children, mather children, child	ns which may includenal and paternal other relationship " is employed under it is employed under it is employed under it is employed in a second to the second in a second in	al uncle, a which conder PTPP in candida declare - condins	nunt, niece, nephould come into project in the sate for this position during the cours PTPP, CTC or/	the ame on. se of ano	
	within PTPP CTC or WHO as of the date mentioned below: Name Designation Organization Province/Distric 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:

Date: 21/07/32



DECLARATION FORM

(TO BE FILLED BY THE EMPLOYEE)

1 Saijad Hussain	,S/D/W/O	Man Zook.	Ahmos	, holding
CNIC 32.403-86.216.4.55., F	Resident of Fi	soul Colony 1	Year Panjab Fo	icites UC
Raina. P. Cas. Sporty i, Tehsil	R.a.jom Pux	, District	. Dajonfof E	imployee for
the position of L.C.P.O	With CH	P Training & Cons	sulting (Pvt) Ltd u	nder its third
party contract for PTPP Project, do hereb	y declare as unde	r:		

- 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

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

Charles

Date: 21/07/2098