

# Employment Application Form

## Instructions:

1. Kindly read the whole form carefully before filling it out.
2. This form must be filled in carefully, truthfully and legibly in capital letters.
3. If any column is not applicable, please write "N.A" or draw a line across it.
4. This form should be completed in ink, in candidate's own handwriting.
5. Attach copies (not originals) of all testimonials and certificates.
6. Please attach additional sheets if space provided in the form is inadequate.
7. An employee who knowingly furnishes any information or particulars which are false or suppresses material information or deliberately submits forged certificates, it will be considered as gross misconduct and provides a ground for stern disciplinary action including but not limited immediate termination and debarred from future employment.

Position applied for: Data Assistant

## 1. PERSONAL INFORMATION

1.1	Full Name	RAFIQ ALI
1.2	CNIC No.	43203-2868162-7
1.3	Date of Birth	30-06-2001
1.4	Father's Name	Ali NAWAZ SHAIKH
	Marital Status	Single
1.5	Name of Spouse (if any)	-
	No. of Children (if any)	-
1.6	Permanent Address	End of Shahi Bazar Shaikh Muhalla Naseer Pathan
1.7	Present Residential Address	Ramsha Avenue Block 13 Gulistan-e-Johar Karachi
1.8	Phone / Cell Numbers	0332-2764942
1.9	E-mail address	rafialali2012@gmail.com

## 2. QUALIFICATIONS

1. List your last two academic qualifications.
2. List your degrees in reverse chronological order, with the most recent degree on top.

3. Always include the essential information, such as the degree name, your major, the name of the university, and the years you attended.

Year	Institution	Degree	Main Subjects	GPA / Division
2023	Sindh Institute of Management & Technology	BSCS	Computer Science	3.30
2019	Governor's Degree College Yarkana	HSC	Pse - Medical	A+

### 3. PREVIOUS EMPLOYMENT

Give details of your present employment.

If you are currently unemployed, give these details in respect of the last employment held by you.

3.1	Name of the Employer	Mico Mexger
3.2	Employer's Address	Karachi
3.3	Duration	3.5 months
3.4	Job Title	Community Block officer
3.5	Main Duties	
3.6	Name & Title of our Immediate Supervisor	MM Alam (CCO)
3.7	Gross Monthly Pay	85,000/-

### 4. GENERAL INFORMATION

4.1	Do you suffer from any serious ailment, or disability? If so, give details.	No,
4.2	Have you ever been tried or convicted for any crime including sexual exploitation or abuse? If so, give full details.	No
4.3	Are you required to serve Notice Period? If yes, mentioned the period.	No
4.4	What are your salary and benefits expectation?	200,000

### 5. PROFESSIONAL REFEREES

Please give the name of two referees (not related to you by blood or marriage or friend) one of which must be your current, or most recent employer if you are currently unemployed. The choice of the second referee is at your discretion, but must not be one of your relatives or friend.

(Professional Reference Only)

	Name	MM Alam
	Nature of association with you.	Supervisor

5.1	First Referee	Organization Name and Address	Mico Mesge
		Phone Number	0300 7022 649
		Email Address	mexicanian@gmail.com
5.2	Second Referee	Name	Ms. Seeriyaa Dadlani
		Nature of association with you.	Supervisor
		Organization name and Address	JSI
		Phone Number	03461666688
		Email Address	seeriyaa.dadlani@hotmail.com

I hereby 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 may be subsequently discovered.

I do/do not give permission for to approach the referees prior to the interview (please delete as applicable)

Date: \_\_\_\_\_

Candidate's Signature: \_\_\_\_\_



TRAINING &  
CONSULTING

Declarations

The candidate namely Rafiq Ali bearing CNIC # 43203-2868162-7 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 relative" is employed at WHO or CTC.

Or

2. That the following Person(s) are employed at CTC or WHO which falls under the standard definition of "blood/close relative".

Name	Designation	Organization	Place of Duty	Relationship
/	/	/	/	/
/	/	/	/	/

3. That, I am not enrolled in any academic program in any college/university/institute either as a full time or part time student or through any online / distance learning programs.

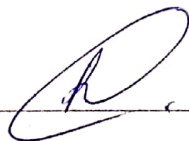
Or

4. That I am pursuing the following regular, part-time studies or e-learning programs.

Title of Degree	Name of College/ Institute/ University	Schedule of Classes
BSCS	Sindh Institute of Management & Technology	Regular

5. That, I am neither working in any government department or private organizations as employee or consultant nor running any private business either as a partner or as a family business.
6. I will not engage in any activity or work that could compete with the business interests of CHIP Training and Consulting (Pvt) Ltd. or present a conflict of interest with my role within the organization. If I am unsure about the potential conflict of interest, I will promptly inform the relevant authorities within the company for clarification.
7. That in case I have any existing commitments or obligations, I will disclose them to the HR department or the relevant authorities within CHIP Training and Consulting (Pvt) Ltd. before accepting this offer of employment.

Signature



Date; \_\_\_\_\_

**E: Sexual Misconduct Declaration Form**

1. Are you the subject of any substantiated findings of sexual misconduct in any current or past employment or faced charges of harassment before any court or other State authorities?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
2. Are you currently being investigated for sexual misconduct at any current or past employer?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
3. Have you left a position during an investigation into a violation of any sexual misconduct policy at any current or past employers?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
4. Are you willing to provide consent for the organization to conduct background checks to verify any information provided regarding past investigations in relations to sexual misconduct?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. If you responded "yes" to any of the questions 1-3 above, please explain the circumstances of the finding(s) and/or investigation(s)	

**Certification and Authorization to Release Information Regarding Sexual Misconduct**

I, Rafiq Ali bearing CNIC # 43203-2668161-7 hereby certify that the information above is true, complete, and accurate to the best of my knowledge. I understand that failure to provide complete and accurate information in response to the above questions will result in disqualification from employment or appointment at CHIP Training and Consulting (Pvt) Ltd. and withdrawal of any offer of employment. By my signature, I authorize any and all current and past employers to disclose to CHIP Training and Consulting (Pvt) Ltd. information, if any, regarding sexual misconduct committed by me, including sexual harassment. I agree to execute any additional forms required by my current or past employer(s) to release such information to the CHIP Training and Consulting (Pvt) Ltd., and by my signature, I hereby release all current and past employers from any and all claims and liability arising from the disclosure of the information described in this paragraph. I further authorize CHIP Training and Consulting (Pvt) Ltd. to contact my current or past employer(s) to verify the information that I have provided.

Rafiq Ali  
Signature

\_\_\_\_\_  
Date

**Locality Verification Form**

5/3

Permanent address as per CNIC:

House No:	105
Street #:	End of Shahi Bazar Shaikh
Village:	Muhalla Naroo Pothas Larkana
Sector/UC:	13
Town /Tehsil:	Larkana
District and Province	Larkana, Sindh

Current Residential Address:

(Kindly don't fill this section if permanent and current address is same)

House No:	B-219
Street#	Ramsha Avenue
Village:	Crulistan-e-Jouhar
Sector/UC	Block 13
Town /Tehsil:	Crulistan
District and P	Karachi

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



**CHIP  
TRAINING &  
CONSULTING**

Apr 17th, 2025

Rafio Ali,  
CNIC # 4320328681627,  
Karachi - Sindh.

**Subject: Offer Letter for the Position of Data Assistant - 20 - Sindh**

Dear Rafio Ali,

This is with reference to your submission of CV for the position of Data Assistant - 20, followed by your appearance in the test & interview conducted by CHIP Training & Consulting (Pvt.) Ltd.

We are pleased to inform you that CHIP Training and Consulting (CTC) has decided to offer you a position as a Data Assistant - 20 at Sindh as part of the Polio Third Party Personnel (PTPP) Project for the Polio Eradication Initiative (PEI) in Pakistan.

Your contract will be valid for a period commencing on the first day of your work. However, your extension will be subject to satisfactory performance of the work/tasks assigned to you and upholding professional ethics in the workplace environment.

The position is based in Karachi - Sindh and you shall be reporting directly to the concerned first line supervisor: M & E Officer and second line supervisor: Provincial Team Lead for all day-to-day/program activities.

This letter should be considered as a firm offer of employment with the following standard, non-negotiable terms of employment:

- (a) Gross salary including all allowances of PKR. 184,661/- per month, subject to withholding tax.
- (b) EOBI deductions will be made as per the rules.
- (c) The employee shall be provided with death and accidental insurance as per entitlement.

In case of acceptance of the above-specified terms and conditions, please send a signed copy of this offer letter by tomorrow at 12:00 noon, along with the expected date of your joining.

This offer letter is conditional and subject to the verification of the information furnished by you at the time of the interview with regards to your locality, education, and previous employment. CTC reserves the right to unilaterally revoke the offer letter if any information furnished by you is found incorrect or misleading.

The formal employment application form and employment contract will be sent to you upon acceptance of offer letter and provide your residence certificate within a month after you commence employment.

Regards



HR Department  
CHIP Training & Consulting

I have read, understood, and agreed to the above terms and conditions and hereby accept the same.

[Signature]

Rafio Ali

CNIC # CNIC # 4320328681627

Date: 17-04-2025

ISLAMABAD OFFICE:  
CTC HOUSE PLOT # 1, (FAYYAZ MARKET)  
ST # 9, G-8/2, ISLAMABAD  
PAKISTAN 44000 - PAKISTAN

ABUJA OFFICE:  
1 CANS PARK IBRAHIM BADAMOSHI  
BABANGIDA BOULEVARD,  
MAITAMA, ABUJATEL, NIGERIA

LONDON OFFICE:  
OFFICE 5 FLOOR 5  
21 KNIGHTSBRIDGE  
LONDON SW1X 7LY

[www.chipconsulting.org](http://www.chipconsulting.org)

### Declaration Forms

**Note:** The following forms deals with the declaration of Kinship, Dual Job, Regular Studies and sexual misconduct by the employee and the disclosure thereof where required.

#### A: Kinship Form

In reference to the Kinship policy of CTC, I do hereby declare as follows:

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 relative" is employed at WHO or CTC.
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 CTC and WHO to CTC at the earliest in writing.
3. The following blood/close relations (as mentioned in article 01 above) are employed within CTC or WHO as of the date mentioned below:

Name	Designation	Organization	District / Province	UC	Relationship

DATE; \_\_\_\_\_

#### B: Regular Studies

I do hereby declare as follows:

1. That, I am not enrolled in any academic program in any college/university/institute either as a full time or part time student or through any online / distance learning programs.
2. The following are the details of my regular or part-time studies or e-learning , if any:

Title of Degree	Name of College/ Institute/ University	Schedule of Classes



### C: Dual Job

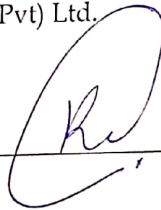
I do hereby declare as follows:

1. That, I am neither working in any government department or private organizations as employee or consultant nor running any private business either as a partner or as a family business.
2. If I am found guilty of making a false or misleading statement while applying for this position, I will be liable for instant dismissal without notice.
3. I will not engage in dual employment while employed at CHIP Training and Consulting (Pvt) Ltd. I understand the importance of dedicating my full attention, time, and efforts to my role at CHIP Training and Consulting (Pvt) Ltd. and ensuring that there are no conflicts of interest arising from my employment.
4. I will not take on any other full-time, part-time, temporary, or contractual employment during my tenure at CHIP Training and Consulting (Pvt) Ltd. This includes any freelance, consulting, or independent work that could potentially interfere with my duties and responsibilities at CHIP Training and Consulting (Pvt) Ltd.
5. I will not engage in any activity or work that could compete with the business interests of CHIP Training and Consulting (Pvt) Ltd. or present a conflict of interest with my role within the organization. If I am unsure about the potential conflict of interest, I will promptly inform the relevant authorities within the company for clarification.
6. In case I have any existing commitments or obligations, I will disclose them to the HR department or the relevant authorities within CHIP Training and Consulting (Pvt) Ltd. before accepting this offer of employment. If such commitments are deemed to create a conflict with my role at CHIP Training and Consulting (Pvt) Ltd., I will take necessary steps to resolve them before my employment start date.

I Rajio Ali bearing CNIC # 43203-2868162-7 hereby declare that the information in the above noted declaration forms of Kinship, Dual Job and Regular Studies are true and correct. I understand that if any information furnished above is found to be false or misleading, I will be liable for immediate dismissal without notice.

I also understand that any violation of these declarations may lead to disciplinary action, including termination of my employment with CHIP Training and Consulting (Pvt) Ltd. This undertaking shall remain in effect for the duration of my employment at CHIP Training and Consulting (Pvt) Ltd.

Signature



Date; \_\_\_\_\_

Bank Account Information Form

Bank Account Information	
Name of Employee	RAFIO ALI
Designation	Data Assistant
Union Council / Area	
District / Agency	Larkana .
Contact No.	03322 764942
CNIC No.	43203-2868162-7

Bank Account Title	Rafio Ali
Bank Name	Meezan Bank
Bank Address	Bank Square Larkana Sindh .
Bank Branch Code	8501
Bank Account Number (16 Digit)	PK18ME2N0085010105999 623

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)

Dated: 17-04-2025

**Note:** Employee will provide the bank account maintenance certificate with this letter next salary processing

**FORM OF NOMINATION FOR DEATH INSURANCE**

**FOR CTC EMPLOYEES**

I Rasid Ali Son/Daughter/Wife of Ali Nawaz Shaikh bearing CNIC # 43203-2868162-7 working as Data Assistant at CHIP Training and Consulting (Pvt) Ltd. (CTC) hereby nominate the person/ persons mentioned below who is/ are member(s) of my family as beneficiary(ies) to receive the death insurance amount (sum assured) in the event of my death.

(First choice)

Name of Nominee/ Nominees	Relationship	Specification of Share	Contact Number
<u>Ali Nawaz Shaikh</u>	<u>Father</u>	<u>50 %</u>	<u>03337544080</u>
<u>M. Nawaz Shaikh</u>	<u>Brother</u>	<u>50 %</u>	<u>03337567427</u>

(In case of death of first choice)

Name of Nominee/ Nominees	Relationship	Specification of Share	Contact Number
<u>Ayesha Khatoon</u>	<u>Mother</u>	<u>100 %</u>	<u>03337544080</u>
		<u>%</u>	

I hereby certified that the above noted member(s) of my family mentioned are wholly dependent upon me.

The earlier nomination made by me (if any) may kindly be treated as cancelled and of no effect.



SIGNATURE OR THUMB IMPRESSION OF  
THE EMPLOYEE

Dated: 18-4-2025





## PTPP Staff Service Rules (CSSR) Receipt and Acknowledgement

By signing this statement, I acknowledge that I have received a soft copy of the SOPs slides presented by Chip Training & Consulting (Pvt) Ltd in the SOPs Session. I also acknowledge that I have been oriented on PTPP SOPs and I am familiar with its contents and agree to abide by all the conditions of employment outlined therein.

Participant Name: Rajio Ali Position: Data Assistant  
Signature: [Signature] Date: 18-4-2025

CTC Official Use

CTC Focal Person : [Signature]

CTC Facilitator: \_\_\_\_\_