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 می ساف کی جانب ہے جراجائے گا) (For official use only to be filled by CTC Staff) عبدہ کا نام جس کے لئے درخوات دی گئی: (Position applied for) منتف ہونے رتعیناتی تربت کی متوقع تاریخ: (سال رمهیندردن) (Expected Date of Induction Training if selected) (Personal Information) علومات 1- ذاتي معلومات (Full Name) مكىل نام 1.1 31301-1556388-1 شاختی کارڈ کانمبر (:CNIC No) 1.2 دیگرشناختی نمبر (شناختی کارڈمیسر نہ ہونے کی صورت میں) 1.3 (Other Identification number if CNIC is not available) 04-04-1995 تاريخ بيدائش (سال رمبيندردن) (Date of Birth * 1.4 (YYYY/MM/DD) تاریخ بیدائش کا جائزه لیں (کسی ایک پرنشان لگائیں) صرف سال معلوم ہے 🗆 تاریخ پیدائش معلوم نہیں 🗌 دن، مہینہ، سال معلوم ہے 1.4.1 (DOB not (Day, Month, (Tick any One) (Check DOB) (Only Year available) Mentioned) Year Available والدرشو بررخوني رشة داركانام (Father's/Husband Name/ 1.5 Name of i.e. Next Kin) (Relationship with Applicant) امیدوار کے ساتھ رشتہ 1.6 (Marital Status) از دواجی حثیت (Gender) 1.7 (Tribe) (Ethnicity) زات (Language) زبان (Permanent Address) 1.8 (District and Union Council) 2009.90 1.9 (Present Address) (Residence) \$ 0304-17922 92 (Mobile) 5,0 (Contact Detail) 2.0 (E-mail) ال (Office) % آخري تغليمي سند 2.1 (Last Qualification) B. COM

[CTC - HRO - NI - Recruitment & Selection - 7.8.6-d-003] [Locality Verification Form - Jan 2020]

(Qualification) 2

(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)

گریڈرڈوییژن (Grade/Division)	اتم مضامین (Major Subjects)	سرٹیفیکیٹ رحاصل کردہ ڈگری (Certificate/ Degree Obtained)	اداره (Institution)	ال (Year)
seel	رسلاملي -	B. L. om	حبيداكا د	2022

(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).			
سفي وردن	(Name of Employer) へいしょう	3.1	
	(Employer's Address) تریمانکمل پیت	3.2	
	(Date of Joining) تاریخ تعیناتی	3.3	
	(Your Last Job Title) آخری عبده	3.4	
	(Main Duties) انهم ذمدداريال	3.5	
	(Name & Title of your المام اورعبده المسلطة المام المسلطة الم	3.6	
	(Gross Monthly Pay) (روپے میں المان عبدہ (روپے میں الم	3.7	

(Past Work Experience) جماية كام كا تجرب 4			
(List all the previous jobs held by you	ı, starting from the earliest).	، کی تفصیل ، آخری ملازمت ہے شروع کریں	آپ کی تمام سابقه ملازمتوں کی فہرست
ایم فرمداریان (Main duties performed by you)	عبده آخری عبد وجب طازمت مچورژی (Position held by you when you left this employer)	کام اور پیتر (Employer's Name & Address)	ووراشير دن-مبينه-سال ادن-مبينه-سال (From/To) (D/M/Y to D/M/Y)

[CTC - HRO - NI - Recruitment & Selection - 7.8.6-d-003] [Locality Verification Form - Jan 2020]

واله جات (References)	2-5		
Give details of 3 references, not related to you by blood or marriage, בא בואופ אין	ن كالتعلق آپ كى كوخونى ياشادى سے جزے دشتہ سے ندوں بلكہ جو آپ	ين (۳) حواله جات دين ، جر	بر م از کم ت
6 6 de - me	(Full Name) (Full Name)	پېلاحواله کم	5.
The say is and deli curilie	(Full Address)	First	
03042/06240	(Contact Number) رغمر	Referee	
Father in law	(Nature of association with you)	آب	
وارث علی	(Full Address)	J	
, Vino cil Ine	(Full Address)	دوسراحواله مكم	5.
03063376 900	(Contact Number)	Second	
دوسك	(Nature of association with you) کونونیت	Referee	
الماس رينا	(Full Name) ゆか	do .	
03 10 64 78 066	(Full Address)	تيسرا حواله مكم	5.
03106478066	(Contact Number)	Third Referee	
Ular	(Nature of association پے کے ساتھ کام کی توعیت with you)		

(General Inform	nation) عموی معلومات
wie	کی آپ کوکوئی معذوری پاییاری تونبیں ہے، اگر ہال تو تفصیل بتا ئیں Do you suffer from any serious ailment or disability? If so, give details.
anj	نه 6 کیا آپ بھی کسی کام کے سلسے میں مجرم تو قر ارنہیں پائے کا گر ہاں تو تفصیل بتا کمیں Have you ever been tried or convicted for nay crime? If so, give full details.
A11 0K	- آپ کے خیال میں درخواست مے متعلق کوئی ایسی معلومات جواس فارم میں موجود نہیں آپ ہمیں بتا سکتے رسکتی ہیں۔ Give any other information not covered by this form which in your opinion is relevant to your application
	? اگرہم آپ کو پنے اوار سے میں کام کرنے کے لئے بلائیں ،آپ کتنے عرصہ میں ہمارے ساتھ کام کر سکتے ہیں؟ If an offer is made to you, how soon can you join to us?
50,000 /-	6 آپ کی متوقع تنخواه اور دیگر فوائد کی کیاامیدر کھتے ہیں؟ What are your salary and benefits expectations?

(Suitability to the Position) عبده کی موز ونیت (Briefly explain why you consider yourself suitable for the position you have applied for).

	در خواست لزار کا حلف نامه
-	۔ یں تصدیق کرتا رکرتی ہوں کداوپر دی گئی تمام معلومات میرے علم اور یقین کے مین مطابق تجی ، درست اور کھل ہیں ، بعد میں کسی مجی معلومات کے غلط ہونے کی صورت میں تادیبی کا روائی کی ذید داری قبول 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

23-12-2023



Bank Account Information		
Name of Employee	MAZHAR HUSSAIN	
Designation	SAFETY WARDEN TRAINER	
Union Council / Area	KATCHA QILA CANTT	
District / Agency	HYDERABAD	
Contact No.	0304-1792292	
CNIC No.	31301-1556388-1	

Bank Account Title	MAZHAR HUSSAIN	
Bank Name	MCB BANK LTD	
Bank Address	MAIN GUL CENTRE BRANCH	
Bank Branch Code	1223	
Bank Account Number (With IBAN)	PK60MUCB1453037891006970	

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: 23-12-2023

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	Mazhar
Position appointed to	Safety Warden
Department and/or Location of appointment	1. Superior-II, Filling Station, Hyderabad 2. Gul Khan Filling Station, Hyderabad
CNIC#	31301-1556388-1
CNIC Expiry Date	23-01-2027
Date of Joining	28-08-2022
Date and Ref. No. of appointment letter	02-09-2022
Supervisors Comments	
Supervisors Signature	



[CTC – HRO – PTPP – Personal File Management – 7.8.5-u-040] [Personal File Check List – Jan 2020]

	CHIP Training	& Consulting (Pvt) Ltd	
	Human Res	source Department	
	Docum	ents Check List	
Designation:		Safety Warden Trainer	y
Name of Employee	Mazhar Hussain	Focal Person for file management	
Area/ Site	Hyderabad	CNIC No	31301-1556388-1
Date of Joining	28-08-2022	Resignation/ Termination Date	

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	✓	

CTC Focal Person	CTC HR Associate
Date	Date

Project	Title	Province	District	Tehsil	area_name	Emplayee_id	Emp_code	Name	Gender	DOB	Age	CNIC	Personal_Number	Email_Address	Date_of_Joining	Last_Qualification _Name	Qualification_Love	Job_position_id	Bank	Account	Employee_Status
ERBS-Shell	Safety warden	Sindh	Hyderabad	Hyderabad	Hyderabad			MAZHAR HUSSAIN	MALE	4/4/1995	30	31301-1556388-1	0304-1792292	mazharhussain 648 @gmail.com	2808-2022	B.Com	REGULAR	Safety Warden Trainer	MCB Bank Ltd	PK 60MUC B14 5303 789 1006 970	Regular
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