

Bank Account Information				
Name of Employee	WAQAS			
Designation	SAFETY WARDEN			
Union Council / Area	62			
District / Agency	HYDERABAD			
Contact No. 0313-3143931				
CNIC No. 41304-9960415-5				

Bank Account Title	WAQAS
Bank Name	BANK AL HABIB
Bank Address	HYDERABAD
Bank Branch Code	5570
Bank Account Number (With IBAN)	5570008100120100

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

<u>Employee will provide the bank account maintenance certificate with this letter for next salary processing.</u>



	CHIP Training &	Consulting (Pvt) Ltd			
	Human Resou	arce Department			
	Documen	ts Check List			
Designation Safety Warden					
Name of Employee	Waqas	Focal Person for file management			
Area/ Site	Mohammadi Chowk	CNIC No	41304-9960415-5		
Date of Joining	20-08-20222	Resignation/ Termination Date	Nil		

S No:	Documents	If Received (🗸)	Remarks (If Any)
1	Academic Credentials (verified by HEC)		
2	Experience Certificates		
3	Resume		
4	Employment Form		V
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	-	· ·
	2		



CHIP TRAINING & CONSULTING

JOINING REPORT BY A NEW EMPLOYEE

Name of the Employee	WAQAS
Position appointed to	SAFETY WARDEN
Department and/or Location of appointment	HYDERABAD FILLING STATION
CNIC#	41304-9960415-5
CNIC Expiry Date	21-02-2033
Date of Joining	20-08-2022
Date and Ref. No. of appointment letter	20-08-2022
Supervisors Comments	
Supervisors Signature	

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 (ی ٹی مٹاف کی جانب ہے بحراجائے گا) (For official use only to be filled by CTC Staff) عبدہ کانام جس کے لئے درخواست دی گئی: (Position applied for) --منتف ہونے برتعیناتی تربیت کی متوقع تاریخ: (سال مہینة ردن) (Expected Date of Induction Training if selected) 1_زاتی معلومات (Personal Information) المكنام (Full Name) مكمل نام 1.1 شاختی کارڈ کانمبر (:CNIC No) 1.2 دیگر شناختی نمبر (شناختی کار ڈمیسر نہ ہونے کی صورت میں) 1.3 (Other Identification number if CNIC is not available) (Date of Birth 28-03-1995 تاریخ پیدائش (سال رمهیندردن) 1.4 (YYYY/MM/DD) تاريخ بيدائش كاجائزه ليس (كسى ايك پرنشان لگائيس) 1.4.1 صرف سال معلوم ہے 🛘 تاریخ پیدائش معلوم نہیں 🗌 دن مہینہ سال معلوم ہے (DOB not (Day, Month, (Tick any One) (Check DOB) (Only Year available) Year Available) Mentioned) (Father's/Husband Name/ والدرشو بررخوني رشته داركانام 1.5 Name of i.e. Next Kin) 1.6 (Relationship with Applicant) امیدوار کے ساتھ رشتہ (Marital Status) از دواجی حشیت (Gender) 1.7 (Tribe) (Ethnicity) زات (Language) زبان (Permanent Address) 1.8 (District and Union Council) 1.9 (Present Address) 0313-3143931 (Mobile) Jis (Contact Detail) 2.0 (Office) % آخري تغليمي سند 2.1 (Last Qualification)

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

(Qualification) علين قابليت

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

تمام تعلیی و تعلیکی قابلیت کی اسناد کی فہرست لکھیں (میٹرک سے شروع کریں)

گریڈرڈویٹر ن (Grade/Division)	اتم مضامین (Major Subjects)	ر میفیکیٹ رحاصل کردوڈگری (Certificate/ Degree Obtained)	اوارو (Institution)	ال (Year)
2 nd	Islamec Culiukë	4213"	B.I. S. E HWERABAD	2014

(Present Employment) موجوده ملازمت3					
(Give details of your present employment. (If you are currently unemployed, give these details in respect of the last employment held by you).	اگرآپ فی الحال بے روزگار ہیں، تو گزشتہ ملازمت کی تفصیلات فراہم کریں				
	(Name of Employer) / tb27	3.1			
	(Employer's Address) ترکاهمل پت	3.2			
	اریخ تعیناتی (Date of Joining)	3.3			
	(Your Last Job Title) آڅری مبده	3.4			
	(Main Duties) انهم ذمدداریاں	3.5			
	(Name & Title of your هجازآ فيركانام اورعبده Immediate Boss)	3.6			
	(Gross Monthly (روپے میں) Pay)	3.7			

(List all the previous jobs held by you	ast Work Experience) , , starting from the earliest).	کو میں میں میں ہے ہوئے کہ میں میں ہے ہوئے ہے۔ کی تفصیل ہ آخری ملازمت ہے شروع کریں	آپ کی تمام سابقه ملازمتوں کی فہرست
اتم ڈمداریاں (Main duties performed by you)	ئېده آخری مجمده جسيلازمت چيواژی (Position held by you when you left this employer)	آجرکام اور پیة (Employer's Name & Address)	و وراني ن-مينه-سال5ان-مينه-سال (From/To) (D/M/Y to D/M/Y)
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			nter et e risseg eta cinici MARA de Piloso - NI (ESA DICTARA) (NE 1996 A.AGICARA)



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:	WAQAS														
S/D/W of;	ABI	ABDUL JABBAR													
CNIC NO:		4 1 3 0 4 9 9 6 0 4 1 5 5													
Position Applied:	Safety Warden														
Permanent address as per CNIC:	House No:			86	62										
		Stree	et #:		В	lock-	5							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
*		Moh	allal	h:	Si	hah I	Vajaf	Colo	ony			***************************************			
	Village:			N	Nil										
	Sector/UC:			N	Nil										
	Town / Tehsil:			: L	Latifabad										
	District			Н	Hyderabad										
Current Residential Address:	House No:		86	62											
(Kindly don't fill this section if permanentand	Street#			В	Block-5										
residential addresses are same)	Mohallah:			Si	Shah Najaf Colony										
Sume	Village:			N	Nil										
	Sector/UC			N	Nil										
	Town / Tehsil:				Latifabad										
		Dist	THE RESERVE OF THE PERSON NAMED IN		CONTRACTOR STATES	lydei	abac	Signature of Applicant:							
Signature&Date:	Date of Form Filling: 23-12-2023						Sign	atur	e of A	Appli ()	cant:				



Disclosure of Relationship Form

(To be filled by Candidate)

I Waqas , S/D/W/O Abdul Jabbar, Holding CNIC 41304-996041-55 , Resident of House No. 862 Block-5 Shah Najaf Colony Unit no. 05 Latifabad Hyderabad, UC 62 ,Tehsil Latifabad ,District Hyderabad Candidate for the position of Safety Warden 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/Distric t	UC	Relationship
		NII	LL		

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

and correct and nothing has been concealed therein.	
	Signature:
	Date:





