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 testimontals 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



(For official use only to be filled by	ی استعمال مے لئے (کی فی مثاف کی جانب سے مجراجاتے گا) y CTC Staff) (کا متحال کے لئے اور کا کا کا کا کا کا کا	مركادم
	نام س كے ليے ورخوات دى كئ: (Position applied for)	Rome
	انے پرتعیناتی تربیت کی ستوقع تاریخ: (سال رمبسندرون)	متخب
	(Expected Date of Induction Training if se	secteur
رزاتی معلومات (Personal Information)	1	
Shanza Akbar	(Full Name) ممل تام	1.1
33105-7841116-4	شاخی کارد کافیر (:CNIC No)	1.2
25/03 /3 ((11))	ویکرشاختی غبر (شاختی کارؤمسرند بونے کی صورت میں)	1.3
"	(Other Identification number if CNIC is not available)	
9-12-1997	(Date of Birth (مال مهيدرون) المراجيد الله (مال مهيدرون) (۲۲۲۲/MM/DD)	1.4
ون ممینه مال معلوم ہے اور اللہ معلوم ہیں اللہ معلوم ہیں (Day, Month, Voar Available)	ارخ پیدائش کا جائز ولیس (کمی ایک پرفتان کا کمی) (Tick any One) (Check DOB)	1.4.1
Mentioned) Ali Akbar	(Father's/Husband Name/ والدوشو بررتوني رشته واركام Name of i.e. Next Kin)	1.5
Faiher	(Relationship with Applicant) امیددار کے ساتھ رشتہ	1.6
Single	(Marital Status) از دیاتی دیشیت	
Female	(Gender)	7
Tomac	(Tribe) تيل	1.7
A	(Ethnicity) زات	1 10 10
Avagein	(Language) زبان	A AV
(Moll) Commody Dill:	(Permanent Address) = پر ل	1.8
ChkNO 197 G-B [drsil Sqmundri Diffsb.	نلع يا يوخن كوشل (District and Union Council)	1.0
Faislabad.	(District and artist	
Madina lown Sunsan road Faishbood	, (Fresent Address)	1
1 Town (Residence) 1. 0349-6855543. (Mobile) 1.	رابط کا تغییل (Contact Detail)	2.0
ar O agrafit mail) Kir Shell Kohinoov(Office) &	(Last Qualification) Mphil من ين المناطقة المنا	2.

	(Qua	lification)	2- يى قابلىت					
(List all your academic and school cert				میں (میزک سے ٹرون کریں)	ابلیت کی اسناد کی فهرست ^{کا}	تمام تعليمي وهنيكي قا		
رُ دُرُادِجُ نِ (Grade/Division)	ابم مضامین (Major Subjects)	(Certi	رنیکیٹ رمام ficate/ Obtained)	اوارو (Institution)	(Ye			
T_{ij} qualities T_{ij} qualities T_{ij} qualities T_{ij}	division. Pre-medical zoology		division Science. Mairic division. Pre-medical FSC (Me Zoology Bs zool		edical FSC (Medical)		2014-	2019. 2016 2016 2019.
	(Present Emplo	ت (yment	_موجوده ملازم	3				
(Give details of your prese,	nt employment. (If you are respect of the last employn	currently und tent held by yo	employed, ou).	بالمازمت في تغييلات فراجم كري	، بدوزگار بین، آزشه	اگرة پ في الحال		
Shanza A				(Name of Employer)	10827	3.1		
chk No 197 G	rB [ehsil Sam	undri D	oist FSD	(Employer's Address)	آ جر کا کمل پند	3.2		
19-Sep-20				(Date of Joining)	تاریخ تعیناتی	3.3		
Sapely was				(Your Last Job Title)	آخرئا فبده	3.4		
Supervising Si		elated	Co Biken	(Main Duties)	الجم فرصداريال	3.5		
→ Muhammo	The second secon	2.754		(Name & Title of your Immediate Boss)	مجازة فيسركانا م اورعبد	3.6		
Thirty four	, [housand	. 140 4.		(Gross Monthly Pay) (ノジャ	مجموعی مابانه عبده (رو	3.7		
	(Past Work Exp	erience) ,	- مابقه کام کاتج	4	-	die F		
(List all the previous jobs l.	Viduo - China G	ONT SANT SEC		عيل، آفرى ملازمت عروع كري	بىلازمتوں كى فېرست كى تۈ	آپ کی تمام سابقہ		
ایم دِمدِواریاں ایم دِمدِواریاں (Main duties performed by you) (Position held by you when you left this employer)		پر باز کر کر آ oyer's Name & Address)	(Fr	دورانی دن بین سال تادن rom/To) Y to D/M/Y)				
Mass reaving Silotroga ce	11	ich Octavie	unive Fais	usity of Agri	10-N	10rch-20		
Teaching	Subje	ci ialist.	Dr. D Passion	ildar 909 School fail	1. 17-11 abodio-	1- 202 57-202		

(Refer	ع-حوالدجات (rences				
we details of 3 references, not related to you by blood or marriage, to can couch for your character and work experience	آب سارداراد کام کراب عداقد	الإثادى عبر عداد عديد الدجا	ديد جن كالتلق ب سيكي ا	غن(۳) والبهات	به کارکرا *
Dr. Ahmed Nawaz		(Full Name)	تملاام	يبلاحواله	5.1
university of Agriculture f	aislabad.	(Full Address)	تمل ويد	First	
0305-5642143		(Contact Number)	داطنير	Referee	
Superulsor In MPWIL WAF)		اعیت (Nature of association) with you			
Mr. Muhammad Naeem Io	NPal	(Full Address)	عمل نام		
Shell kohinoor Faislaba	d.	(Full Address)	مل په	נוקופונ	5.2
D300-8648535		(Contact Number)	رابلاثير	Second Referee	
Manager at shell kohing	xx FSD	(Nature of association with you)	Sprancy1	GROOM REFEE TO	_
Mr. Manzey Ali Aloid.		(Full Name)	تملتام		
Integrated Pest Management	Llaboratory	(Full Address)	تمل په	تیمرا حوالہ Third	5.3
0305-6576985		(Contact Number)	دايطنبر	Referee	
Colleague.		(Nature of association يُومِت with you)			
(General Informa	عموی معلومات (ation	.6			
	1	الربال وتغميل بتائين	وری با بیماری تولیس ہے، ا	ليا آپ <i>وڙو</i> ٺ معذ	6.1
No	Do you suffer from any	serious admicnt or disability? I	if so, give details	186 1	100
1/0	Have you ever been tries	فیس پائے واگر ہاں تو تفسیل بتا کمیں d or convicted for nay crime? li	ا من من عرم او قرار so, give full details	ياپ ن ده	0.2
	ل آپ میں ہائے رمگنی ہیں۔	شی معلومات جواس فارم میں موجودتیم میں not covered by this form wi	رخواست سے متعلق کو کی ا	پ کے خیال میں و مصصورہ ما	6.
No	to your application				-
: within fifteen days	If an offer is made to you,	کے لئے بلا کیں مآپ کتنے فرصہ میں 10 how soon can you join to us?			
Siray Five Mousand	What are your salary and	الله ين؟ I benefits expectations?	ورد میمرفوائد کی کیاامیدر کے	پ کی متو قع تخواها	.1 6.
(Suitability to the Posit			N.		
my ability (o contri your Organization.	ground in knowled in the knowled in the second in the seco	managen ge of am con the Suc	nent o human nfidew ccess	and	آپ ک
	درخواست گزار کا حلف نا				

Slovery. (Cantidate's Signature)

21-12-2023 Excluse

[CTC - HRO - PTPP - Recruitment & Selection - 7.8.5-c-037] [Field Joining Form - Jan 2020]



CHIP TRAINING & CONSULTING

JOINING REPORT BY A NEW EMPLOYEE

Name of the Employee	Shanza Akbav
Position appointed to	Sabely warden
Department and/or Location of appointment	Shell kohinoon Faislabad.
CNIC#	33105-7841116-4
CNIC Expiry Date	11-07-2028
Date of Joining	19- Sep- 2022
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	The second secon



William Day	Bank Account Information	
Name of Employee	Shanza Akbav	
Designation	Safeiy worden	
Union Council / Area		
District / Agency	Faislabad	
Contact No.	0349-6855543	
CNIC No.	33105-7841116-4	

Bank Account Title	SHANZA AKBAR
Bank Name	MCB
Bank Address	Dudolivala branch Jaranwala road Faislabad
Bank Branch Code	1040
Bank Account Number (With IBAN)	M PK48MUCB1458565971008462

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: 21-12-2023

Slozon.

Note:

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

TRAINING & CONSULTING

CHIP Training & Consulting (Pvt). Ltd <u>Declaration Form of Candidate for Residential Address</u> (To be filled & signed by Candidate)

ame of Candidate as er CNIC:	Shanza AK	ban,	
/D/W of;	All Akbar.	acceptance of the second second second second	
ENIC NO:	3310	SECRETAL SERVICES AND AND CONTRACTOR OF THE CONTRACTOR	
Position Applied:	- Section Property	e-tophographical delication of the entire transfer	
Permanent address as per CNIC:		CHK NO 197 G.B This Samundri Dista Faislabed	
anga wii	Street #:	strept No D.	
	Mohallah:	1	
	Village:	CHK NO 197 G.B.	
	Sector/UC:	•	
	Town / Tehsil:	Samundii.	
	District	Faislabad	
Current Residential Address:	House No:	Super ideal girls hosted offestion to MTM.	
(Kindly don't fill this section if permanent and	Street#	Sunsan Road Madina jown.	
residential addresses are same)	Mohallah:	y and the second	
sune)	Village:	11	
	Sector/UC	y	
	Town / Tehsil:	Modina Jown.	
	District	foilabad.	
Signature & Date:	Date of Form Fillin	ng: Signature of Applicant:	
	ינים ב-עו-ונר		

17-17-18-18-18-18-18-18-18-18-18-18-18-18-18-	
TRAINING	
TRAINING &	
CONSULTING	i
COUSCILING	ı

Disclosure of Relationship Form

I ()NOWS AVIET	pe filled by Candidate)	
- Marion - Indiana	D/W/O All Akben Holding	CNIC
Safely warden	Candidate for the position	District
third party contract for PTPP project	, do hereby declare as under:	under its

- 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.
- 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
		1			
-					
_				4	de con

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

21-120-2023.

Date:

TRAINING & CONSULTING

	CUID Tenlaing & (Consulting (Pvt) Ltd	
	Human Resou	rce Department	
	Documen	ts Check List	
Designation Sal	sely wavden.	f - fll-	Abrar Hussain.
Name of Employee	Shanza Akban	Focal Person for file management	
Aura / Cita	Shell kohinoon	CNIC No	33105-7841116-4
Area/ Site Date of Joining	19-Sep- 2022	Resignation/ Termination Date	"

S No:	Documents	If Received (🗸)	Remarks (If Any)
1	Academic Credentials (verified by HEC)	~	
2	Experience Certificates	X	
3	Resume	V	
4	Employment Form	X	
5	Kinship Form		
6	Physical Verification Form	X	
7	Education and Dual Job Verification form	X	
8	Bank Detail Form	X	
9	Contract Letter In Hard Copy	X	
10	Security Clearance Form (If Applicable)	X	Plan.
11	Copy Of CNIC	V	
12	Passport size Photograph	/	
13	Sops Acknowledgement Form	X	
14	Joining Form	X	
1			