

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.

صرف دفتر استعمال کے لئے (مہلکی کی طرف سے بھرا جائے گا) (For official use only to be filled by CTC Staff)

عہدہ کا نام جس کے لئے درخواست دی گئی: (Position applied for)
منتخب ہونے پر تعیناتی تربیت کی توقع تاریخ: (سال/مہینہ/دن)
(Expected Date of Induction Training if selected)

1- ذاتی معلومات (Personal Information)		
MUHAMMAD USMAN UMAR	(Full Name) مکمل نام	1.1
34501-1949844-7	(CNIC No.) شناختی کارڈ کا نمبر	1.2
	دیگر شناختی نمبر (شناختی کارڈ میسر نہ ہونے کی صورت میں) (Other Identification number if CNIC is not available)	1.3
18-8-1991	(Date of Birth) تاریخ پیدائش (سال/مہینہ/دن) (YYYY/MM/DD)	1.4
<input type="checkbox"/> تاریخ پیدائش معلوم نہیں (DOB not Mentioned) <input type="checkbox"/> صرف سال معلوم ہے (Only Year available) <input checked="" type="checkbox"/> دن، مہینہ، سال معلوم ہے (Day, Month, Year Available)	(Tick any One) (Check DOB)	1.4.1
AMEER HAMZA	(Father's/Husband Name/ Name of i.e. Next Kin) والد/شوہر/خونی رشتہ دار کا نام	1.5
Brother	(Relationship with Applicant) امیدوار کے ساتھ رشتہ	1.6
Married	(Marital Status) ازدواجی حیثیت	1.7
Male	(Gender) صنف	
Jutt	(Tribe) قبیلہ	
Chahal	(Ethnicity) ذات	
Punjabi	(Language) زبان	
Ghazawal Kalam Narowal	(Permanent Address) مکمل پتہ	1.8
Narowal	(District and Union Council) ضلع یا یونین کونسل	
Ghazawal Kalam Narowal	(Present Address) موجودہ پتہ	1.9
(Residence) پتہ: 03006232217 (Mobile) موبائل نمبر	(Contact Detail) رابطہ کی تفصیل	2.0
507ubman@gmail.com (E-mail) ای میل نمبر	(Office) دفتر	2.1
M.A (Urdu)	(Last Qualification) آخری تعلیمی سند	

2- تعلیمی قابلیت (Qualification)

(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)

گریڈ/ڈویژن (Grade/Division)	اہم مضامین (Major Subjects)	سرٹیفکیٹ/حاصل کردہ ڈگری (Certificate/ Degree Obtained)	ادارہ (Institution)	سال (Year)
Matric 2nd	Phy, Che	Matric	Govt Muslim	2007
1st	Civics Edu	F.A	School NWL	2010
2nd	Pol science	B.A	BISE chnew	2012
2nd	Urdu	M.A	BISE chnew PU LHR	2016

3- موجودہ ملازمت (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).)

اگر آپ فی الحال بے روزگار ہیں، تو گزشتہ ملازمت کی تفصیلات فراہم کریں

(Name of Employer)	آجر کا نام	3.1
(Employer's Address)	آجر کا مکمل پتہ	3.2
(Date of Joining)	تاریخ تیسرے	3.3
(Your Last Job Title)	آخری عہدہ	3.4
(Main Duties)	اہم ذمہ داریاں	3.5
(Name & Title of your Immediate Boss)	میرزا فیصلہ کا نام اور عہدہ	3.6
(Gross Monthly Pay)	مجموعی ماہانہ عہدہ (روپے میں)	3.7

4- سابقہ کام کا تجربہ (Past Work Experience)

(List all the previous jobs held by you, starting from the earliest).

آپ کی تمام سابقہ ملازمتوں کی فہرست کی تفصیل، آخری ملازمت سے شروع کریں

اہم ذمہ داریاں (Main duties performed by you)	عہدہ آخری عہدہ جب ملازمت چھوڑی (Position held by you when you left this employer)	آجر کا نام اور پتہ (Employer's Name & Address)	دورانیہ دن - مہینہ - سال - دن - مہینہ - سال (From/To) (D/M/Y to D/M/Y)

5-حوالہ جات (References)

Give details of 3 references, not related to you by blood or marriage, who can vouch for your character and work experience. آپ کو کم از کم تین (3) حوالہ جات دیں، جن کا تعلق آپ کے کسی کوئی رشتہ سے نہ ہو، بلکہ جو آپ کے کاروبار کام کے تجربے سے واقف ہو۔

MUHAMMAD IMRAN Moh. Jawad colony Teh & Distt Narowal 0304- 43380 66	(Full Name) مکمل نام (Full Address) مکمل پتہ (Contact Number) رابطہ نمبر (Nature of association with you) آپ کے ساتھ کام کی نوعیت	5.1 First Referee
MUHAMMAD MASOOM Moh. Rehman Pura Teh & Distt Narowal 0304- 6026212	(Full Name) مکمل نام (Full Address) مکمل پتہ (Contact Number) رابطہ نمبر (Nature of association with you) آپ کے ساتھ کام کی نوعیت	5.2 Second Referee
MUHAMMAD ARSHAD Moh. Rehman Pura Teh & Distt Narowal 0304- 2505256	(Full Name) مکمل نام (Full Address) مکمل پتہ (Contact Number) رابطہ نمبر (Nature of association with you) آپ کے ساتھ کام کی نوعیت	5.3 Third Referee

6-عمومی معلومات (General Information)

No	6.1 کیا آپ کو کوئی مفروضی یا بیماری تو نہیں ہے، اگر ہاں تو تفصیل بتائیں Do you suffer from any serious ailment or disability? If so, give details
No	6.2 کیا آپ کبھی کسی کام کے سلسلے میں مجرم تو قرار نہیں پائے، اگر ہاں تو تفصیل بتائیں Have you ever been tried or convicted for any crime? If so, give full details
No	6.3 آپ کے خیال میں درخواست سے متعلق کوئی ایسی معلومات جو اس فارم میں موجود نہیں آپ نہیں بتا سکتے ہیں۔ Give any other information not covered by this form which in your opinion is relevant to your application
Long Time	6.4 اگر ہم آپ کو سنے ادارے 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?
	6.5 آپ کی متوقع تنخواہ اور دیگر فوائد کی کیا امید رکھتے ہیں؟ What are your salary and benefits expectations?

7-عہدہ کی موزونیت (Suitability to the Position)

(Briefly explain why you consider yourself suitable for the position you have applied for) آپ کے خیال میں آپ کیوں اس عہدہ کے لئے زیادہ موزوں ہیں؟

درخواست گزار کا حلف نامہ

میں تصدیق کرتا کرتی ہوں کہ اوپر دی گئی تمام معلومات میرے علم اور یقین کے عین مطابق ہیں، درست اور مکمل ہیں، بعد میں کسی بھی معلومات کے غلط ہونے کی صورت میں تادیبی کارروائی کی ذمہ داری قبول کرتا کرتی ہوں۔
I 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 be subsequently discovered



امیدوار کے دستخط
(Candidate's Signature)

تاریخ (Date)



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

Name of Candidate as per CNIC:	MUHAMMAD USMAN UMAR	
S/D/W of;	MUHAMMAD UMAR DRAZ	
CNIC NO:	3 4 5 0 1 1 9 4 9 8 4 4 7	
Position Applied:	Safety warden	
Permanent address as per CNIC:	House No:	
	Street #:	
	Mohallah:	
	Village:	Ghazawal KALAN
	Sector/UC:	Bala Bajwa
	Town /Tehsil:	Narowal
	District	Narowal
	Current Residential Address: <i>(Kindly don't fill this section if permanent and residential addresses are same)</i>	House No:
Street#		
Mohallah:		
Village:		Ghazawal Kalam
Sector/UC		Bala Bajwa
Town /Tehsil:		Narowal
District		Narowal
Signature & Date:		Date of Form Filling:



Disclosure of Relationship Form

(To be filled by Candidate)

I M..USMAN...UMAR, S/D/W/O M..UMAR..DRAZ Holding CNIC
34.Saf..1949844..7, Resident of Ghazawal...Kalam...P/o..Teh.&Distt...Narawal
UC Bala...Bajwa....., Tehsil...Narawal....., District
Narawal..... 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/District	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:



DECLARATION FORM

(TO BE FILLED BY THE EMPLOYEE)

I M. USMAN UMAR....., S/D/W/O M. UMAR DRAZ....., holding CNIC 34501-1969804-7....., Resident of Ghazawal Kalam NWL..... UC Bala Bajwa....., Tehsil Narowal....., District Narowal..... Employee 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, 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 (Gov/Private)	Department/ Organization name	Private business. if any	Any other part time job

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:



Bank Account Information	
Name of Employee	MUHAMMAD USMAN UMAR
Designation	SAFETY WARDEN
Union Council / Area	NAROWAL
District / Agency	NAROWAL
Contact No.	0300 6232217
CNIC No.	34501-1949844-7

Bank Account Title	MUHAMMAD USMAN UMAR
Bank Name	MUSLIM COMMERCIAL BANK
Bank Address	KUTCHERY ROAD NAROWAL
Bank Branch Code	0827
Bank Account Number (With IBAN)	PK49 MUCB 1473 119331011814

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: _____

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	MUHAMMAD USMAN UMAR
Position appointed to	SAFETY WARDEN
Department and/or Location of appointment	NEW ALKARM FILLING STATION HAROWAL
CNIC#	34501-1949844-7
CNIC Expiry Date	5-08-2032
Date of Joining	8-12-2022
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	

CHIP Training & Consulting (Pvt) Ltd			
Human Resource Department			
Documents Check List			
Designation	Safety warden		
Name of Employee	MUHAMMAD USMAN UMAR	Focal Person for file management	
Area/ Site	Nazawal	CNIC No	34501-1949844-7
Date of Joining	8-12-2022	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	✓	