



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

Name of Candidate as per CNIC:	GHULAM MUSTAFA	
S/D/W of;	Muhammad Benaras Naz	
CNIC NO:	3 7 2 0 1 1 7 4 6 7 8 3 3	
Position Applied:		
Permanent address as per CNIC:	House No:	No
	Street #:	No
	Mohallah:	No
	Village:	Laphi
	Sector/UC:	KANUN KHAN
	Town /Tehsil:	KANUN KHAN
	District	Chakwal
	Current Residential Address: <i>(Kindly don't fill this section if permanent and residential addresses are same)</i>	House No:
Street#		09
Mohallah:		Behman Town
Village:		Jhengi Seydan
Sector/UC		Islamabad
Town /Tehsil:		Islamabad
District		Islamabad
Signature & Date:		Date of Form Filling:
	20-12-2023	



DECLARATION FORM

(TO BE FILLED BY THE EMPLOYEE)

I GHULAM MUSTAFA.....S/D/W/O Muhammad Banaras Naz....., holding CNIC 27201-1746793-3....., Resident of Leela v.p.a. Raphi..... UC Rame....., Tehsil Leela, Jammu....., District Chakwal..... Employee for the position of 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 (Govt/Private)	Department/ Organization name	Private business, if any	Any other part time job
<u>GHulam Mustafa</u>	<u>Nil</u>	<u>Nil</u>	<u>Nil</u>	<u>CTC Cuyler</u>	<u>Nil</u>	<u>Nil</u>

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

Signature

GHulam Mustafa

Date: 20-12-2023

2- تعلیمی قابلیت (Qualification)

(List all your academic and technical qualifications, starting with school certificate (Matriculation) تمام تعلیمی و فنی قابلیت کی اسناد کی فہرست لکھیں (میٹرک سے شروع کریں)

گرید/ڈویژن (Grade/Division)	اہم مضامین (Major Subjects)	سرٹیفکیٹ/معاہل کردہ ڈگری (Certificate/ Degree Obtained)	ادارہ (Institution)	سال (Year)
C	Science	ایف-ای-سی 2021	Islamabad Model collage	2021
A	Science	میٹرک	Furkhan F/10/4	2019

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 نوٹ شدہ ملازمت کی تفصیلات فراہم کریں

Ghulam Mustafa	(Name of Employer)	آجر کا نام	3.1
CTD chip Training Consulting	(Employer's Address)	آجر کا پتہ	3.2
12-01-2023	(Date of Joining)	تاریخ تیساری	3.3
Safety warden	(Your Last Job Title)	آخری عہدہ	3.4
Control All safety steps.	(Main Duties)	اہم ذمہ داریاں	3.5
M. Saleem Boss	(Name & Title of your Immediate Boss)	مجاز آفیسر کا نام اور عہدہ	3.6
33000 + 10000 Net Package	(Gross Monthly Pay)	مجموعی ماہانہ عہدہ (روپے میں)	3.7

4- سابقہ ملازمت 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 ذمہ داری (Position held by you when you left this employer)	آجر کا نام اور پتہ (Employer's Name & Address)	دورانیہ ان-تاریخ سے تا-تاریخ (From/To) (D/M/Y to D/M/Y)
Fiber splices	Fiber splices	Ghulam Mustafa	01-01-2022
		Jangisaydan	01-01-2023

APPENDIX-XIV

Submission Date: 15-6-2020

FORM 'P-1'

Issue Date: 15-6-2020

The Pakistan Citizenship Act, 1951 (II OF 1951)
and the rules made there under or (vide rule 23)

CERTIFICATE OF DOMICILEWhereas GHULAM MUSTAFAS/O MUHAMMAD BANARAS NAZ

has applied for the grant of a certificate of domicile under the Pakistan Citizenship Act, 1951 (II of 1951), alleging with respect to himself / herself the particulars set out below and has satisfied the undersigned that the conditions laid down in Section 17 of the said Act for the grant of a Certificate of Domicile are fulfilled in the said

GHULAM MUSTAFA

case.

NOW, Therefore, in pursuance of the powers conferred by the said Act and the rules made there under, the undersigned hereby grants to the said GHULAM MUSTAFA this Certificate of Domicile.

In Witness whereof, I have hereto subscribed my name this day of 15-6-2020 and Domicile No is CWL-6-2020-442.



[Signature]
Assistant Commissioner
for Deputy Commissioner,
Chakwal

FULL PARTICULARS RELATING TO THE APPLICANT

Full Name GHULAM MUSTAFAS/O MUHAMMAD BANARAS NAZAddress in Pakistan V.P.O. LAPHI TEHSIL KALLAR KAHAR DISTRICT CHAKWALPlace of Domicile LAPHI(Domicile) Tehsil Kallar KaharDistrict ChakwalProv/Admn: PUNJABDate of Arrival in Place of Domicile Since BirthD.o.B 3-9-2001Married/Single/Widow/Widower SingleCNIC 3720117467833Name of Wife or Husband N/AName of Children and their Ages N/ATrade or Occupation JOBLESSMark of Identification NIL

[Signature]
Assistant Commissioner
Kallar Kahar

for Deputy Commissioner,
Chakwal



(References) 5-حوالہ جات

Give details of 3 references, not related to you by blood or marriage, who can vouch for your character and work experience. آپ کو اہم ترین (3) حوالہ جات دیں جن کا تعلق آپ کے کسی ٹوٹی یا شادی سے لے کر شہ سے نہیں بلکہ جو آپ کے کردار اور کام کے بارے سے واقف ہو۔

Saif Ichan Golra Mori Islamabad 0343-9530868 Friend	(Full Name) (Full Address) (Contact Number) (Nature of association with you)	تعمیل نام تعمیل پتہ رابطہ نمبر آپ کے ساتھ کام کی نوعیت	5.1 پہلا حوالہ First Referee
Afeeq Ichan 26 No. Pind Paracha 0315-7543140 Friend	(Full Name) (Full Address) (Contact Number) (Nature of association with you)	تعمیل نام تعمیل پتہ رابطہ نمبر آپ کے ساتھ کام کی نوعیت	5.2 دوسرا حوالہ Second Referee
Ameer Mulkhaty 26 No Pind Paracha 0310-0117210 Friend	(Full Name) (Full Address) (Contact Number) (Nature of association with you)	تعمیل نام تعمیل پتہ رابطہ نمبر آپ کے ساتھ کام کی نوعیت	5.3 تیسرا حوالہ Third Referee

(General Information) 6-عمومی معلومات


No	6.1 کیا آپ کو کوئی معذوری 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 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 میں بتا سکتے ہیں۔ Give any other information not covered by this form which in your opinion is relevant to your application.
Life Time	6.4 اگر ہم آپ کو اپنے ادارے میں کام کرنے کے لئے بلائیں، آپ کتنے عرصے میں ہمارے ساتھ کام کر سکتے ہیں؟ If an offer is made to you, how long can you join to us?
50000+ food + travelling	6.5 آپ کی متوقع تنخواہ اور دیگر فوائد کی کیا امید رکھتے ہیں؟ What are your salary and benefits expectations?

(Suitability to the Position) 7-عہدہ کی موزونیت

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

اسلام علیکم - وسیع تجربے کی وجہ سے اور کھیرت
ساختہ بات صحبت رکھنے والی خلیفہ میں خانی - جرم یہو کیا ہے۔ اور
ہم نے خانی ساری چیزیں میں نے کی ہے۔ جس کی وجہ سے میں نے اپنی
خلیفہ خانی اچھے طریقے سے کام کر سکتا ہوں۔
درخواست گزار کا حلف نامہ

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 mis-statement that be subsequently discovered.


امیدوار کے دستخط
(Candidate's Signature)

20-12-2023 تاریخ (Date)

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 given in this form is subsequently found to be incorrect, it will be construed as a gross misconduct, liable to be punished by instant dismissal and other disciplinary action as may be appropriate to the nature of misstatement.

(For official use only to be filled by CTC Staff) (صرف دفتر ہی استعمال کے لئے (سی آئی سی سٹاف کی جانب سے پُر ہائے گا))

..... **SAFETY WARDEN** (Position applied for) بعد دیکھا جس کے لئے درخواست دی گئی
..... **12-01-2023** (Expected Date of Induction Training if selected)
(سال میں روزانہ) منتخب ہونے پر تین ماہ کی تربیتی تربیت کی تاریخ: (سال میں روزانہ)

1- ذاتی معلومات (Personal Information)

1.1	مکمل نام (Full Name)	Ghulam Mustafa
1.2	شناختی کارڈ نمبر (CNIC No)	37201-1746783-3
1.3	دیگر شناختی نمبر (شناختی کارڈ یا سمرٹ کارڈ کی صورت میں) (Other Identification number if CNIC is not available)	Nil
1.4	تاریخ پیدائش (سال/ماہ/دن) (Date of Birth (YYYY/MM/DD))	03-09-2001
1.4.1	تاریخ پیدائش کا جائزہ لیں (کسی ایک پر نشان لگائیں) (Check DOB) (Tick any One)	<input type="checkbox"/> دن ہی میں سال معلوم ہے (Day, Month, Year Available) <input type="checkbox"/> صرف سال معلوم ہے (Only Year available) <input type="checkbox"/> تاریخ پیدائش معلوم نہیں (DOB not Mentioned)
1.5	والد/شوہر/رہنوی رشتہ دار کا نام (Father's/Husband Name/ Name of i.e. Next Kin)	Aziz Ali
1.6	امیدوار کے ساتھ رشتہ (Relationship with Applicant)	Brother
	ازدواجی حیثیت (Marital Status)	Single
	صنف (Gender)	Male
1.7	قبیلہ (Tribe)	AWAN
	زات (Ethnicity)	AWAN
	زبان (Language)	URDU- Punjabi- Basic English
1.8	مکمل پتہ (Permanent Address)	Vpo Laphi Tensi Kaur Kahar Chakwal
	ضلع/یونین کونسل (District and Union Council)	Chakwal
1.9	موجودہ پتہ (Present Address)	Jaingi Sogdan Benman town Islamabad
2.0	رابطہ کی تفصیل (Contact Detail)	(Residence) فون: 0335-1418856 (Mobile) فون: 0336-1531048 (Office) E-mail: mustafaawan6469@gmail.com
2.1	آخری تعلیمی سند (Last Qualification)	F.S.C. Pre Engineering

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 construed 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 دفتر ہی استعمال کے لئے (یعنی ہی سٹاف کی جانب سے مہر لگانے کے لئے) (For official use only to be filled by CTC Staff)

SAFETY GUARDEN

(Position applied for) عہدہ کا نام جس کے لئے درخواست دی گئی

12-01-2023

(Expected Date of Induction Training if selected) منتخب ہونے پر تعیناتی تربیت کی متوقع تاریخ: (سال/مہینہ/دن)

(Expected Date of Induction Training if selected)

1- ذاتی معلومات (Personal Information)

Ghulam Mustafa	(Full Name) مکمل نام	1.1
37201-1746783-3	(CNIC No) شناختی کارڈ نمبر (CNIC No)	1.2
Nil	(Other Identification number if CNIC is not available) دیگر شناختی نمبر (شناختی کارڈ نمبر نہ ہونے کی صورت میں)	1.3
03-09-2001	(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) تاریخ پیدائش کا جائزہ لیں (کسی ایک پر نشان لگائیں)	1.4.1
Awis Ali	(Father's/Husband Name/ Name of i.e. Next Kin) والد/شوہر/دفعوی رشتہ دار کا نام	1.5
Brother	(Relationship with Applicant) امیدوار کے ساتھ رشتہ	1.6
Single	(Marital Status) ازدواجی حیثیت	
Male	(Gender) صنف	
AWAN	(Tribe) قبیلہ	1.7
AWAN	(Ethnicity) ذات	
Urdu - Punjabi - Kasbi English	(Language) زبان	
Vpo Laphi Tensi Okara Kahar Chakwal	(Permanent Address) مکمل پتہ	1.8
Chakwal	(District and Union Council) ضلع اور یونین کونسل	
Jangji Sogdan Khanan town Islamabad	(Present Address) موجودہ پتہ	1.9
(Residence) فون: 0335-1418856 (Mobile) موبائل	(Contact Detail) رابطہ کی تفصیل	2.0
(E-mail) ای میل: mustafaawan6469@gmail.com (Office) دفتر: 0336-1531048		
F.S.C. Pre Engineering	(Last Qualification) آخری تعلیمی سند	2.1

mustafaawan6469@gmail.com



Disclosure of Relationship Form

(To be filled by Candidate)

I G. Gulam Mustafa S/D/W/O Muhammad Banaqiz Holding CNIC
37201-1746783-2, Resident of Leela Leela VPO Rathi
UC same Tehsil. Leela Leela District
Chakwal Candidate for the position of
Society 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
<u>Saif Idnan</u>	<u>Nil</u>	<u>Nil</u>	<u>Islamabad</u>	<u>Isl</u>	<u>Friend</u>
<u>Ameez</u>	<u>AeroTrade</u>	<u>PAF</u>	<u>Islamabad</u>	<u>Isl</u>	<u>Friend</u>
<u>Afwey</u>	<u>Nil</u>	<u>Nil</u>	<u>Islamabad</u>	<u>Isl</u>	<u>Friend</u>

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: 20-12-2022

FEDERAL BOARD OF INTERMEDIATE AND SECONDARY EDUCATION, ISLAMABAD
HIGHER SECONDARY SCHOOL CERTIFICATE (HSSC) EXAMINATION

Roll No. 516831
Group. PRE-ENGINEERING
Registration No. 1913161029
Certificate No. 161400045



RESULT CARD
ANNUAL EXAMINATION 2021

GHULAM MUSTAFA

S / D of MUHAMMAD BANARAS NAZ

of (Institution) Islamabad Model College for Boys, F-10/4, Islamabad

_____ has secured the marks shown against each
subject in the Higher Secondary School Certificate (HSSC) Examination held in the month(s) of July - Sep

Mark of Identification : _____

	Subject(s)	Subj. Max. Marks	MARKS OBTAINED						Pass / Fail	Remarks	
			HSSC-I			HSSC-II					P-I & II Total
			Th.	Pr.	Total	Th.	Pr.	Total			
1	ENGLISH COMPULSORY	200	056		056	056		056	112	PASS	
2	URDU COMPULSORY	200	056		056	056		056	112	PASS	
3	ISLAMIC EDUCATION	050	028		028				028	PASS	
4	PAKISTAN STUDIES	050				028		028	028	PASS	
5	MATHEMATICS	200	065		065	065		065	130	PASS	
6	PHYSICS	200	032		032	032	021	053	085	PASS	
7	CHEMISTRY	200	046		046	046	023	069	115	PASS	

Total Marks obtained 610 / 1100 (Six Hundred Ten Only out of Eleven Hundred)

The Candidate has Passed and awarded Grade C

Islamabad Dated September 27, 2021

Note : Errors / Omissions excepted



CONTROLLER OF EXAMINATIONS



موجودہ پتہ: رحمان ٹاؤن گلی نمبر 9، مکان نمبر 8، ڈاک خانہ
خاص، جھنگلی سیداں، تحصیل و ضلع اسلام آباد

37201-1746783-3



مستقل پتہ ڈاک خانہ خاص، لاپھی، تحصیل کلر سمار، ضلع
چکوال

500062092377

Asman M. Moin
Registrar General of Pakistan

گمشدہ کارڈ ملنے پر قریبی لیٹر بکس میں ڈال دیں



CHIP TRAINING & CONSULTING

JOINING REPORT BY A NEW EMPLOYEE

Name of the Employee	Ghulam Mustafa
Position appointed to	SAFETY WARDEN
Department and/or Location of appointment	CTC Chip Training & Consulting / safe way filling station Adyala road.
CNIC#	37201-1746783-3
CNIC Expiry Date	25-09-2030
Date of Joining	12-01-2023
Date and Ref. No. of appointment letter	27-01-2023
Supervisors Comments	
Supervisors Signature	



PAKISTAN National Identity Card

ISLAMIC REPUBLIC OF PAKISTAN



Name
Ghulam Mustafa

غلام مصطفیٰ



Father Name
Muhammad Banaras Naz

محمد بنارس ناز

Gender | Country of Stay

M

Identification Number | Date of Birth
37202-17-0783-8 | 03.09.2001

Date of Issue | Date of Expiry
25.09.2020 | 25.09.2030



G. Mustafa

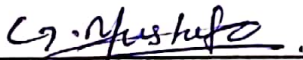
Holder's Signature



Bank Account Information	
Name of Employee	G HULAMI MUSTAFA
Designation	SAFETY WARDEN
Union Council / Area	TARNOD
District / Agency	Rawalpindi CTe
Contact No.	0335-1418856
CNIC No.	37201-1746783-3

Bank Account Title	G HULAMI MUSTAFA
Bank Name	Muslim Commercial Bank (MCB)
Bank Address	1629-TARNOD G.T ROAD BRANCH
Bank Branch Code	1629
Bank Account Number (With IBAN)	PK36MCB147480021005265

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: 20-12-2023

Note:

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