



CHIP TRAINING & CONSULTING

JOINING REPORT BY A NEW EMPLOYEE

Name of the Employee	Mohsin Ali Phulpoto
Position appointed to	safety warden
Department and/or Location of appointment	Lahore filling station
CNIC#	43304 188 78 059
CNIC Expiry Date	24-30-2030
Date of Joining	Feb-11-2023
Date and Ref. No. of appointment letter	15-2-2023
Supervisors Comments	
Supervisors Signature	



Disclosure of Relationship Form

(To be filled by Candidate)

I Muhammad Ali S/D/W/O Shaham Muzahid Holding CNIC
433241887805 Resident of Commission compound Colony SNP
 UC OS Tehsil Sheikhanpur District
Sheikhanpur 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: 24-12-23

2۔ تعلیمی قابلیت (Qualification)

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

تمام تعلیمی و فنی قابلیت کی اسناد کی کاپیاں (بزرگ سے شروع کریں)

گریڈ/ڈویژن (Grade/Division)	اہم مضامین (Major Subjects)	سرٹیفکیٹ حاصل کردہ ڈگری (Certificate/ Degree Obtained)	ادارہ (Institution)	سال (Year)
2nd division	Accounting	B.com Part II	S.A.I.U Board Ichai vpw	2023

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

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

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۔ عہدہ۔ سال تا دن۔ عہدہ۔ سال (From/To) (D/M/Y to D/M/Y)



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

Name of Candidate as per CNIC:	Mohsin Ali Phulpoto	
S/D/W of:		
CNIC NO:	4 3 3 0 4 1 8 8 7 8 0 5 9	
Position Applied:		
Permanent address as per CNIC:	House No:	
	Street #:	Haji Latif Shah Street
	Mohallah:	Abulsham-e-Mustafa Camp Sulemanpur
	Village:	
	Sector/UC:	08
	Town / Tehsil:	Sulemanpur
	District	Sulemanpur
Current Residential Address: <i>(Kindly don't fill this section if permanent and residential addresses are same)</i>	House No:	
	Street#	Haji Latif Shah road
	Mohallah:	Abulsham-e-Mustafa Camp
	Village:	
	Sector/UC	08
	Town / Tehsil:	Sulemanpur
	District	
Signature & Date:	Date of Form Filling:	Signature of Applicant:
24-12-23	24-12-23	



Bank Account Information	
Name of Employee	Mohsin ALI Phulpoto
Designation	safety warden
Union Council / Area	UC 08
District / Agency	shikarpur
Contact No.	031920 67461
CNIC No.	43304 18878 059

Bank Account Title	Mohsin ALI
Bank Name	UBL
Bank Address	Tumans Hall shikarpur
Bank Branch Code	0964
Bank Account Number (With IBAN)	0109 0002 9292 3919

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: 24-12-2023

Note:

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

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.

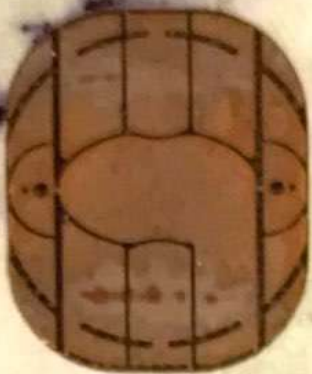
Affix a recent passport sized Colour photograph here

(For official use only to be filled by CTC Staff) صرف دفتری استعمال کے لئے (سی ٹی سی سٹاف کی جانب سے پُر کیا جائے گا)

مہدو کا نام جس کے لئے درخواست دی گئی: (Position applied for) safety warden
منتخب ہونے پر متوقع تاریخ: (Expected Date of Induction Training if selected) _____
(سال/مہینہ/دن)

1۔ ذاتی معلومات (Personal Information)

1.1	مکمل نام (Full Name)	ساکرمت علی قلیوٹو
1.2	شناختی کارڈ نمبر (CNIC No)	43304 188 78 059
1.3	دیگر شناختی نمبر (شناختی کارڈ نمبر نہ ہونے کی صورت میں) (Other Identification number if CNIC is not available)	
1.4	تاریخ پیدائش (سال/مہینہ/دن) (Date of Birth (YYYY/MM/DD))	(5/3/2002)
1.4.1	تاریخ پیدائش کا جائزہ لیں (کسی ایک پر نشان لگائیں) (Check any One) تاریخ پیدائش کا جائزہ لیں (کسی ایک پر نشان لگائیں) (Check any One)	<input type="checkbox"/> تاریخ پیدائش کا جائزہ لیں (کسی ایک پر نشان لگائیں) <input type="checkbox"/> صرف سال معلوم ہے (Only Year available) <input checked="" type="checkbox"/> دن، مہینہ، سال معلوم ہے (Day, Month, Year Available)
1.5	والد شوہر پر رشتہ دار کا نام (Father's/Husband Name/ Name of i.e. Next Kin)	غلام صمد علی قلیوٹو
1.6	امیدوار کے ساتھ رشتہ (Relationship with Applicant)	فرزند
1.7	ازدواجی حیثیت (Marital Status)	سنگل
	صنف (Gender)	میل
	قبیلہ (Tribe)	قلیوٹو
	ذات (Ethnicity)	قلیوٹو
1.8	زبان (Language)	سنڈھی
	مکمل پتہ (Permanent Address)	گندیشہ صرہوٹا کالونی ملو (طیڈ مشاہ 20)
1.9	موجودہ پتہ (Present Address)	مشہ کار پور
2.0	رابطہ کی تفصیل (Contact Detail)	موبائل نمبر (Mobile) 0319 2067461 رہائشی پتہ (Residence) m.p.moh...
2.1	آخری تعلیمی سند (Last Qualification)	B.Com بی بی قوم



89724

PAKISTAN

National Identity Card

ISLAMIC REPUBLIC OF PAKISTAN

Name

Mohsin Ali

محسن علي

Father Name

Ghulam Mustafa Alias Babo

غلام مصطفيٰ عرف بابو

Gender

M

Country of Stay

Pakistan

Identity Number

43304-1887805-9

Date of Birth

05.03.2002

Date of Issue

24.03.2020

Date of Expiry

24.03.2030



Signature

Holder's Signature

هاٽو ڪو پتو: گلشن مصطفيٰ ڪالوني، محلہ حاجي لطيف شاه

روڊ، شڪارپور

43304-1887805-9

مستقل پتو: گلشن مصطفيٰ ڪالوني، محلہ حاجي لطيف شاه

روڊ، شڪارپور



105071240337

Waseem H. Mehmood

Registrar General of Pakistan

ڪم ٿيل ڪارڊ ملڻ تي ويجهي ٿيڻال جي ڊپي ۾ وجهو

