

**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 استعمال کے لئے (سی بی سی سٹاف کی جانب 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 متوقع تاریخ: (سال/مہینہ/دن) \_\_\_\_\_  
(Expected Date of Induction Training if selected)

**1- ذاتی معلومات (Personal Information)**

MOHAMMAD KHAN	(Full Name) مکمل نام	1.1
45509-0153315-9	(CNIC No.) شناختی کارڈ کا نمبر	1.2
-	(Other Identification number if CNIC is not available) دیگر شناختی نمبر (شناختی کارڈ میسر نہ ہونے کی صورت میں)	1.3
20-10-1997	(Date of Birth) تاریخ پیدائش (سال/مہینہ/دن)	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) تاریخ پیدائش کا جائزہ لیں (Check DOB) (کسی ایک پر نشان لگائیں)	1.4.1
ABDUL SATTAR PATHAN	(Father's/Husband Name/ Name of i.e. Next Kin) والد/رشتہ پر خونی رشتہ دار کا نام	1.5
	(Relationship with Applicant) امیدوار کے ساتھ رشتہ	1.6
SINGLE	(Marital Status) ازدواجی حیثیت	1.7
MALE	(Gender) صنف	
	(Tribe) قبیلہ	
PATHAN	(Ethnicity) ذات	
SINDHI	(Language) زبان	
House B-1109 SHAH LATIF CHOK ROHRI	(Permanent Address) مکمل پتہ	1.8
SUKKUR	(District and Union Council) ضلع یا یونین کونسل	
House 155A ALRAHIM VILLAS CRASIMBO	(Present Address) موجودہ پتہ	1.9
(Residence) رہائش 03004197199 (Mobile) موبائل	(Contact Detail) رابطہ کی تفصیل	2.0
(E-mail) ای میل (Office) دفتر		
BACHELORS OF ARTS	(Last Qualification) آخری تعلیمی سند	2.1

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 کم از کم تین (3) حوالہ جات دیں، جن کا تعلق آپ کے کسی فونی یا شاہدی سے جڑے رشتہ سے نہ ہو، بلکہ جو آپ کے کردار اور کام کے تجربے سے واقف ہو۔

5.1	پہلا حوالہ First Referee	تکمل نام کمل پتہ رابطہ نمبر آپ کے ساتھ کام کی نوعیت	SYED ALI AKBAR SHAH HNO: F-916 DINAL SHAH JO RIRH GARI KHA 0302 3470389 FRIEND
5.2	دوسرا حوالہ Second Referee	تکمل نام کمل پتہ رابطہ نمبر آپ کے ساتھ کام کی نوعیت	SUHAIL RAZA SHAH FLAT NO 9 MAZINE FIOR B-H NASEEM SHOPPING MALL QASIMABAD 03363695366 FRIEND
5.3	تیسرا حوالہ Third Referee	تکمل نام کمل پتہ رابطہ نمبر آپ کے ساتھ کام کی نوعیت	HAIDER AGHEEM HOUSE NO 024/100 ABDULLAH TOWN QASIMABAD FRIEND 03420333476 FRIEND

6-عمومی معلومات (General Information)

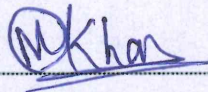
6.1	کیا آپ کو کوئی معذوری یا بیماری تو نہیں ہے، اگر ہاں تو تفصیل بتائیں Do you suffer from any serious ailment or disability? If so, give details.	NO
6.2	کیا آپ کبھی کسی کام کے سلسلے میں مجرم تو قرار نہیں پائے، اگر ہاں تو تفصیل بتائیں Have you ever been tried or convicted for any crime? If so, give full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

7-عہدہ کی موزونیت (Suitability to the Position)

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

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)

10-05-2023 تاریخ (Date)

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)
SECOND CLASS	ECONOMICS	BACHELORS OF ARTS	UNIVERSITY OF SINDH	2021

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 تعیناتی	3.3
-	(Your Last Job Title)	آخری عہدہ	3.4
-	(Main Duties)	اہم ذمہ داریاں	3.5
-	(Name & Title of your Immediate Boss)	مجاز آفیسر 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 تا دن - مہینہ - سال (From/To) (D/M/Y to D/M/Y)
-	-	-	-
-	-	-	-
-	-	-	-



**Disclosure of Relationship Form**

(To be filled by Candidate)

I MOHAMMAD KHAN, S/D/W/O ABDUL SATTAH, Holding CNIC 45509-0153315-9,  
Resident of Howe 155A ALRAHEEM VILLAS RAJIMABAD, UC RAJIMABAD,  
Tehsil COASTIMABAD District HYDERABAD Candidate  
for the position of SEFTY 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:

10-05-23

Date:



### DECLARATION FORM

(TO BE FILLED BY THE EMPLOYEE)

I MOHAMMAD KHAN.....S/D/W/O ABDUL SAJJAR holding  
CNIC 45502-0153315-9 Resident of H.NO. ISSA ALKHAJIM VICAS UC  
....., Tehsil QASIMABAD....., District HYDERABAD. 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 (Govt/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.

M. Sha  
Signature

10-05-2023

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:	MOHAMMAD KHAN	
S/D/W of;	ABDUL SATTAR PATHAN	
CNIC NO:	4550201533159	
Position Applied:	SAFETY WARDEN	
Permanent address as per CNIC:	House No:	B-1109
	Street #:	
	Mohallah:	SHAH LAFIF CHOWK
	Village:	ROHRI
	Sector/UC:	21
	Town /Tehsil:	ROHRI
	District	SUKKUR
Current Residential Address: <i>(Kindly don't fill this section if permanent and residential addresses are same)</i>	House No:	155A
	Street#	4
	Mohallah:	AL RAHIM VILLAS
	Village:	
	Sector/UC	
	Town /Tehsil:	QASIMABAD
	District	HYDERABAD
Signature & Date:	Date of Form Filling:	Signature of Applicant:
	10-05-2023	



## CHIP TRAINING & CONSULTING

### JOINING REPORT BY A NEW EMPLOYEE

Name of the Employee	MOHAMMAD KHAN
Position appointed to	SAFETY WARDEN
Department and/or Location of appointment	DEPLOY AT BHATTAI FILLING STATION HYDERABAD-TERRIORY
CNIC#	45509-0153315-9
CNIC Expiry Date	11-12-2025
Date of Joining	05-05-2023
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	<u>Suhail</u>

**Bank Account Required Information Form**

Sr. No	Particulars	Details	
1	Name (as per CNIC)	MOHAMMAD KHAN	Date: 10-05-23
2	Father/Husband Name	ABDUL SATTAR PATHAN	
3	Relation	MOTHER	
4	Mother First Name	RUKSANA	
5	Date of Birth	20-10-1997	
6	CNIC No.	45509-0153315-9	
7	CNIC Expiry Date	11-12-2025	
8	Mobile	0300-4197129	
9	Home Address	House No 155A ALRAHEM VILLAS NEAR BYPASS QASIMABAD HYDERABAD	

Signature: \_\_\_\_\_

