



### 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 in the nature of misstatement.

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

Safety Warden

(Position applied for) (مہدوہ کام جس کے لئے درخواست دی گئی)

(Expected Date of Induction Training if selected)

(Expected Date of Induction Training if selected)

#### 1۔ ذاتی معلومات (Personal Information)

عبدالرحمن طاہر	(Full Name)	1.1
81202-7898237-5	(CNIC No.)	1.2
— — —	(Other Identification number if CNIC is not available)	1.3
23-05-2003	(Date of Birth (YYYY/MM/DD))	1.4
<input type="checkbox"/> DOB not Mentioned <input type="checkbox"/> Only Year available	(Day, Month, Year Available)	1.4.1
محمد طاہر	(Father's/Husband Name/ Name of I.e. Next Kin)	1.5
والد	(Relationship with Applicant)	1.6
غیر شادی شدہ	(Marital Status)	1.7
مرد	(Gender)	
جوہداری	(Tribe)	
جوہداری	(Ethnicity)	
اردو	(Language)	1.8
ٹھکانہ ایس۔ اے۔ 1، کلاں، ضلع کلاں، تحصیل کلاں	(Permanent Address)	
— — —	(District and Union Council)	1.9
— — —	(Present Address)	2.0
0349-8090604	(Mobile)	2.1
ashraf@et57@gmail.com	(E-mail)	
میسٹر	(Last Qualification)	

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 3 حوالہ جات دیں جن سے آپ کے کردار اور کام کی صلاحیت کی تصدیق کر سکیں۔ یہ حوالہ جات آپ کے رشتہ داروں یا رشتہ داروں سے نہیں ہونے چاہئیں۔			
5.1	پہلا حوالہ First Reference	محمد سلیم خان (Full Name) بلاری، دارتیاں، تحصیل و ضلع ہری پور (Full Address) 0346-5035104 (Contact Number) Manger JJ Petroleum (Nature of association with you) آپ کے ساتھ کام کی نوعیت	
5.2	دوسرا حوالہ Second Reference	محمد سلیم خان (Full Name) لوگنا نہ ضلع، تحصیل و ضلع ہری پور (Full Address) 0308-3855606 (Contact Number) Safety Warden (Nature of association with you) آپ کے ساتھ کام کی نوعیت	
5.3	تیسرا حوالہ Third Reference	 (Full Name) (Full Address) (Contact Number) (Nature of association with you) آپ کے ساتھ کام کی نوعیت	

6۔ عمومی معلومات (General Information)	
6.1	کیا آپ کو کوئی معذوری یا بیماری تو نہیں ہے مگر آپ کو تنصیل دیا گیا ہے؟ Do you suffer from any serious ailment or disability? If so, give details. نہیں
6.2	کیا آپ کو کسی بھی قسم کے جرم سے متعلقہ فراموشی پانے مگر آپ کو تنصیل دیا گیا ہے؟ Have you ever been tried or convicted for any crime? If so, give full details. نہیں
6.3	آپ کے خیال میں درخواست سے متعلق کوئی ایسی معلومات جو اس فارم میں موجود نہیں ہے آپ کو دینا چاہئے۔ Give any other information not covered by this form which in your opinion is relevant to your application. نہیں
6.4	اگر آپ کو ہمارے ساتھ کام کرنے کے لئے جگہ ملے تو آپ کتنے عرصے میں ہمارے ساتھ کام کر سکتے ہیں؟ If an offer is made to you, how soon can you join us? جب تک Shell Brand موجود ہے۔
6.5	آپ کی تنخواہ اور فائدہ کی توقع کیا ہے؟ What are your salary and benefits expectations? 55,000 + Food

7۔ جگہ کی موزونیت (Suitability to the Position)	
آپ کے خیال میں آپ کیسے اس جگہ کے لئے زیادہ موزوں ہیں؟ (Briefly explain why you consider yourself suitable for the position you have applied for.)	
<p>کیونکہ Safety سے میرا دلی تعلق ہے اور یہ کام بھی Safety کا ہے۔ اس لیے میں اس کو اپنے لیے موزوں سمجھتا ہوں۔</p>	

درخواست گزار کا حلف نامہ	
<p>میں تصدیق کرتا ہوں کہ اوپر دی گئی تمام معلومات میرے علم اور یقین کے عین مطابق ہیں اور درست اور عمل ہیں۔ بعد میں کسی بھی معلومات کے لحاظ ہونے کی صورت میں تادیبی کارروائی کی ذمہ داری قبول کرتا ہوں۔</p> <p>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.</p>	

  
(Candidate's Signature)

22-R-23

تاریخ

2- تعلیمی قابلیت (Qualification)

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

تمام تعلیمی قابلیت کی اسٹیٹ کی لہجہ سے لیس (بڑا ک سے شروع کریں)

گریڈ/ڈویژن (Grade/Division)	اہم مضامین (Major Subjects)	سرٹیفکیٹ حاصل کردہ ڈگری (Certificate/ Degree Obtained)	اسٹیٹ (Institution)	سال (Year)
Grade B	Arts (Humanities)	Matric	Bright home & land school Kotli	2020

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، توگزشتہ ملازمت کی تفصیلات فراہم کریں

عسکری کالج	(Name of Employer)	آرکائیو	3.1
ٹھکانہ خاص، ٹھکانہ، کوٹلی	(Employer's Address)	آرکائیو	3.2
03-07-2023	(Date of Joining)	تاریخ انضمام	3.3
سبفشی وارڈن	(Your Last Job Title)	آخری عہدہ	3.4
سبفشی + ڈسپینسری	(Main Duties)	اہم ذمہ داریاں	3.5
محمد سلیم (سیروائزر)	(Name & Title of your Immediate Boss)	مقامی افسر کا نام اور عہدہ	3.6
34000	(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 تفصیلات فراہم کریں

اہم ذمہ داریاں (Main duties performed by you)	عہدہ آخری عہدہ ملازمت چھوڑی (Position held by you when you left this employer)	آرکائیو کا نام اور پتہ (Employer's Name & Address)	تاریخ سے - تاحینہ سال - تاحینہ سال (From/To) (D/M/Y to D/M/Y)
پرز جینز کا حساب رکھنا اور کام پر نظر رکھنا	سبفشی	عسکری کالج، ٹھکانہ، کوٹلی	12-2022 06-2023
پارسل کی ہوم ڈیلیوری کرتا	ڈیلیوری بوائے	" " "	12-2021 + 11-2022



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

Name of Candidate as per CNIC:	Asharab Javed.	
S/D/W of;	M. Javed.	
CNIC NO:	8 1 2 0 2 7 8 9 8 2 3 7 5	
Position Applied:	Safety Warden.	
Permanent address as per CNIC:	House No:	
	Street #:	
	Mohallah:	
	Village:	Tara Aghar P/O Khas Ramroti
	Sector/UC:	
	Town /Tehsil:	Kotli
	District	Kotli
Current Residential Address:  (Kindly don't fill this section if permanent and residential addresses are same)	House No:	
	Street#	
	Mohallah:	
	Village:	
	Sector/UC	
	Town /Tehsil:	
	District	
Signature & Date:	Date of Form Filling:	Signature of Applicant:
	22-12-23	



**Disclosure of Relationship Form**

(To be filled by Candidate)

I Asharab Javed, S/D/W/O M. Javed, Holding CNIC  
81202-78982375, Resident of Tara Aghar P/O Khas Gannati  
UC Koth, Tehsil Koth, District  
Koth 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:

SHARI

Date: 22-12-23



### DECLARATION FORM

(TO BE FILLED BY THE EMPLOYEE)

I Asharab Javed S/D/W/O M. Javed holding CNIC 81201-7898293 Resident of Tara aghar P/O Gannath UC Tehsil Kotli District Kotli 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
<u>Asharab Javed</u>	<u>Nil</u>	<u>-</u>	<u>Private</u>	<u>Bar-N-Bite Cafe</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

SHARI

Date: 22-12-23

### Bank Account Information

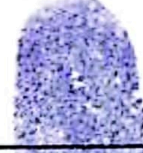
Name of Employee	Asharab Javed
Designation	Safety warden
Union Council / Area	
District / Agency	Kotli
Contact No.	0349-8090604
CNIC No.	81202-7898237-5

Bank Account Title	Current Account
Bank Name	Muslim Commercial Bank (MCB)
Bank Address	Pang Piran Branch Kotli AK.
Bank Branch Code	4014
Bank Account Number (With IBAN)	150319181100153

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.

SARFI-

Employee Signature  
(Mandatory)



Employee Thumb Impression  
(Mandatory)

Dated: 22-12-23

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	Asharab Javed.
Position appointed to	Safety warden.
Department and/or Location of appointment	CHIP Training and consulting (JJ Petroleum Kottli AJK)
CNIC#	81202-7898237-5
CNIC Expiry Date	18-06-2031
Date of Joining	03-07-2023
Date and Ref. No. of appointment letter	
Supervisors Comments	
Supervisors Signature	



**AJ&K BOARD OF INTERMEDIATE AND SECONDARY EDUCATION, MIRPUR  
SECONDARY SCHOOL CERTIFICATE EXAMINATION ANNUAL 2020**

**RESULT CARD**

ROLL NO: 164453

Group : HUMANITIES

Registration No. 2046591009

FID NO: 417415



ASHARAB JAVED son / daughter of  
MUHAMMAD JAVED of (Institution/District)  
BRIGHT HOMELAND SCHOOL DISTT. KOTLI AJK

\_\_\_\_\_ has secured marks  
shown against each subject in the Secondary School Certificate Examination

Mark of Identification NONE

Sr. No	SUBJECTS	Marks Obtained				PASS/ FAIL	Remarks
		THEORY		PRACTICAL			
		P-I	P-II	P-II	Total		
01	ENGLISH	036	036		072	PASS	
02	URDU	049	049		098	PASS	
03	ISLAMIYAT	040	040		080	PASS	
04	PAKISTAN STUDIES	033	033		066	PASS	
05	GENRAL MATHEMATICS	053	053		106	PASS	
06	GENERAL SCIENCE	033	033		066	PASS	
07	ISLAMIC STUDIES	049	049		098	PASS	
08	CIVICS	061	061		122	PASS	

EXTRA (3%) MARKS ON THE BASIS OF PART-I RESULT : 11

TOTAL MARKS (IN FIGURES) 719 / 1100

(IN WORDS) SEVEN HUNDRED NINETEEN .

GENERAL REMARKS THE CANDIDATE HAS PASSED AND PLACED IN GRADE B  
THE MARKS AWARDED FOR PART-II(2020) ARE THE BEST PREDICTION  
OF THE PERFORMANCE AND HAS BEEN AWARDED BASED ON THE  
FORMULAE AND GUIDELINES APPROVED BY THE GOVERNMENT AND  
HENCE CONSIDERED AS VALID AND FAIR.

Date of Birth 23-05-2003

(IN WORDS) 23RD MAY TWO THOUSAND THREE

Mirpur. Dated 24TH SEP, 2020

Note: Errors / Omissions excepted

CONTROLLER OF EXAMINATIONS

موجودہ پتہ: شمارہ اگمار، ڈاک خانہ خاص، قمری، تحصیل و ضلع  
کوٹلی

81202-7898237-5



مستقل پتہ: شمارہ اگمار، ڈاک خانہ خاص، قمری، تحصیل و ضلع  
کوٹلی

102131403041

Registrar General of Pakistan

گمشدہ کارڈ ملنے پر قریبی لیٹر بکس میں ڈال دیں



**PAKISTAN**

ISLAMIC REPUBLIC OF PAKISTAN

**National Identity Card**

Resident of AJK State



Name  
**Asharab Javed**

عشارب جاويد



Father Name  
**Muhammad Javed**

محمد جاويد

Gender	Country of Stay
M	Pakistan

Identity Number	Date of Birth
81202-7898237-5	23.05.2003

Date of Issue	Date of Expiry
18.06.2021	18.06.2031



SHARAB

Holder's Signature

90143