ı.	To be completed by the applicant.				
a (mark)					

Full Name	Rozing
Employee Code	10603126
CNIC #	17101-5066886-2
Designation	CHW
Union council	malakandher
Block	City

LEAVE DETAILS:

Type Of Leave	Annual		Sick		Emergency	Other	
Leave Req	uested For	# of Days	15	From:	13-8-23	To:	27 -8-23
Brief Reason of Leave			U my	cuh			and the second

CONTACT DETAILS

Address During Leave		Saudia				
Mobile Number	~	-		gra		

Applicant Signature	Date		
Line Manager Signature	OCD 6 Designation	Date 2-8-23	
#		2.8.53	
UCPO Signature	Date		

Leave Policy:

- Annual Leave is earned each month.
- Maximum 5 Annual Leaves can be used per quarter. (3 months of each quarter)
- At the end of the Quarter, 50% of unused leaves will be carried forward to next quarter.
- If leave is for 6 or more days, then Sunday will also count as an annual leave.
- I eave cannot be taken during or less than 7 days before the campaign