



CHIP Training and Consulting (Pvt) Ltd

LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	IHSANULLAH
Designation	UCPO
CNIC No.	17102-1128893-3
District/UC	Mohmand / Landi shah
Leave application date	2/7/2020

SECTION 2: DETAILS OF LEAVE	
Reason of Leave Applied for (Tick in appropriate box)	
<input type="checkbox"/> Hajj	<input type="checkbox"/> Umrah/Ziarat
<input type="checkbox"/> Chillah, Tableegh, Bhikaf	<input type="checkbox"/> Christmas, Diwali
<input type="checkbox"/> Study/Exams	<input type="checkbox"/> Maternity
<input type="checkbox"/> Family Wedding	<input type="checkbox"/> Self-Wedding
<input type="checkbox"/> Immediate Family Death	<input checked="" type="checkbox"/> Self-Sick Leave
<input checked="" type="checkbox"/> Immediate Family-Sick Leave	<input type="checkbox"/> Accident/Sickness-while at work
<input type="checkbox"/> Accident/Sickness-while not at work	<input type="checkbox"/> Emergency Leave
<input type="checkbox"/> Vacations	<input type="checkbox"/> Others
Number of Days Leave Applied for <u>3</u> days	
Leave start date <u>7/7/2020</u>	Leave end date <u>9/7/2020</u>
OIC Name and designation <u>Zakir khan UCPO</u>	
Employee signature: <u>[Signature]</u>	Date: <u>2/7/2020</u>
PEO endorsement: <u>Approved MHAza</u>	Date: <u>7/7/2020</u>
PTL endorsement: _____	Date: _____
For more than Two weeks _____	Date: _____
CTC final approval: _____	Date: _____

CTC Remarks, if any _____

NOTE: Leaves during campaign days are NOT allowed