

CHIP Training and Consulting (Pvt) Ltd

LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	AJMAL KHAN
Designation	UCPO
CNIC No.	11201-7340440-7
District/UC	Lakki Marwa/Daratang
Leave application date	10-07-2020

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, Ehtikaf	<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 type="checkbox"/> Self-Sick Leave
<input type="checkbox"/> Immediate Family-Sick Leave	<input type="checkbox"/> Accident/Sickness-while at work
<input type="checkbox"/> Accident/Sickness-while not at work	<input checked="" type="checkbox"/> Emergency Leave
<input type="checkbox"/> Vacations	<input type="checkbox"/> Others

Number of Days Leave Applied for: _____

Leave start: 11-07-2020 Leave end: 11-07-2020

OIC Name and designation:
Dr. Waqar Ahmed PEO(WHO)

Employee signature: *Ajmal* Date: 10-07-2020

PEO endorsement: _____ Date: _____

PTL endorsement: _____
For more than Two weeks Date: _____

CTC final approval: _____ Date: _____

CTC Remarks, if any _____

NOTE: Leaves during campaign days are NOT allowed