

CHIP Training and Consulting (Pvt) Ltd LEAVE APPLICATION FORM-PTPP Project

Employee Name Designation TCSP CNIC No. 1710 1919152 - 1 District/UC Mohmand Affair Cequit Course Reason of Leave Applied for (Tick in appropriate box) Hajj	SECTION 1: APPLICANT'S DETAILS			
District/UC Leave application date 17/0 19/9/32 20	Employee Name	Ahmad	Chal	
District/UC Leave application date 17/0 19/9/32 20	Designation	TOSP		
Reason of Leave Applied for (Tick in appropriate box) Hajj	CNIC No. 17101-1919152-1			
Reason of Leave Applied for (Tick in appropriate box) Hajj	District/UC Mohmand/ Afghar Regyre Cour			
Reason of Leave Applied for (Tick in appropriate box) Hajj	Leave application date	11/07/2021	Ď	
Reason of Leave Applied for (Tick in appropriate box) Hajj Umrah/Ziarat Chillah, Tableegh, Ehtikaf Christmas, Diwali Study/Exams Maternity Family Wedding Self-Wedding Immediate Family Death Self-Sick Leave Accident/Sickness-while at work Accident/Sickness-while not at work Vacations Others Number of Days Leave Applied for: 03 11-07-2020 Leave start date 13/7/2000 Leave end date MS/7/2000 Employee signature: Date: PEO endorsement: Recommended for approval please Date: PTL endorsement: For more than Two weeks Date: Date: Date:				
Hajj Umrah/Ziarat Chillah, Tableegh, Ehtikaf Christmas, Diwali Study/Exams Maternity Family Wedding Self-Wedding Immediate Family Death Self-Sick Leave Accident/Sickness-while at work Accident/Sickness-while not at work Vacations Others Number of Days Leave Applied for: 03 11-07-2020 Leave start date 13/7/2020 Leave end date 15/7/2020 Coll Name and designation: OIC Name and designation: Date: PEO endorsement: Recommended for approval please Date: PTL endorsement: For more than Two weeks Date:				
Christmas, Diwali Chillah, Tableegh, Ehtikaf Christmas, Diwali Maternity Self-Wedding Immediate Family Death Immediate Family-Sick Leave Accident/Sickness-while at work Accident/Sickness-while not at work Vacations Others Number of Days Leave Applied for: OIC Name and designation: Tajwaki Mar UGW Employee signature: Date: PEO endorsement: Recommended for approval please PTL endorsement: For more than Two weeks Date:	TI 1/7:			
Study/Exams Maternity Family Wedding Self-Wedding Immediate Family Death Self-Sick Leave Immediate Family-Sick Leave Accident/Sickness-while at work Accident/Sickness-while not at work Emergency Leave Vacations Others Number of Days Leave Applied for: 03 11-07-2020 Leave start date 13/7/20				
Family Wedding Immediate Family Death Immediate Family-Sick Leave Accident/Sickness-while at work Accident/Sickness-while at work Emergency Leave Vacations Number of Days Leave Applied for: 03 11-07-2020 Leave start date 13/7/2000 Leave end date 13/7/2000 Leave end date 13/7/2000 Employee signature: Date: PEO endorsement: Recommended for approval please Date: PTL endorsement: For more than Two weeks Date: Date				
Immediate Family Death Immediate Family-Sick Leave Immediate Family-Sick Leave Accident/Sickness-while at work Emergency Leave Others Number of Days Leave Applied for: 03 11-07-2020 Leave start date 13/7/2020 Leave end date 15/7/2020 Colic Name and designation: Date: PEO endorsement: Recommended for approval please Date: PTL endorsement: For more than Two weeks Date:				
Immediate Family-Sick Leave Accident/Sickness-while at work Emergency Leave Others Number of Days Leave Applied for: 03 11-07-2020 Leave start date 13/7/2010 Leave end date 15/7/2010 Dic Name and designation: Tywali plan UGW Employee signature: Date: PEO endorsement: Recommended for approval please Date: PTL endorsement: For more than Two weeks Date:				
Accident/Sickness-while not at work Vacations Number of Days Leave Applied for: 03 11-07-2020 Leave start date 13/7/20 Leave end date 15/7/20 OIC Name and designation: Typical War USPU Employee signature: Date: PEO endorsement: Recommended for approval please Date: PTL endorsement: For more than Two weeks Date:				
Number of Days Leave Applied for: 03 11-07-2020 Leave start date 13/7/2020 Leave end date 15/7/2020 Leave end date 15/7/2020 Leave end date 15/7/2020 Employee signature: Date: PEO endorsement: Recommended for approval please Date: PTL endorsement: For more than Two weeks Date:				
Number of Days Leave Applied for: 03 11-07-2020 Leave start date 13/7/2020 Leave end date 15/7/2020 Colic Name and designation: Date: PEO endorsement: Recommended for approval please Date: PTL endorsement: For more than Two weeks Date:				
Date: PEO endorsement: PTL endorsement: For more than Two weeks Leave end date IS/ 7/2010 Date: Date: Date: Date:	Number of Days Leave Applied for: A7 11 07 2000			
OIC Name and designation: (Pajwali klar vepu) Employee signature: Date: PEO endorsement: Recommended for approval please Date: PTL endorsement: For more than Two weeks Date:				
Employee signature: Date: PEO endorsement: Recommended for approval please Date: PTL endorsement:				
Employee signature: PEO endorsement: Recommended for approval please Date: PTL endorsement: For more than Two weeks Date: Da				
PEO endorsement: Recommended for approval please Date: PTL endorsement: For more than Two weeks Date:	Tajwali klar OCHO			
PEO endorsement: Recommended for approval please Date: PTL endorsement: For more than Two weeks Date:	Employee signature:	Date://		
PTL endorsement: For more than Two weeks	PEO endorsement: Recommended for approval please Date:			
For more than Two weeks Date:	220 03.100.100.100.100.100.100.100.100.100.1			
CTC final approval: Date:		 Date:		
CTC final approval: Date:				
	CTC final approval:	Date:		

NOTE: Leaves during campaign days are NOT allowed

CTC Remarks, if any _____