

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

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Sajjad Ahmad
Designation	UCPO
CNIC No.	21708-5854728-1
District/UC	Dabkot / Wana (SOTD)
Leave application date	06-07-20

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 checked="" 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	
Leave start date 08-07-20	Leave end date 10-07-20
OIC Name and designation: Saif ur Rehman (UCPO)	
Employee signature: <i>[Signature]</i>	Date: 06/07/20
PEO endorsement: <i>[Signature]</i>	Date: 08/07/2020
PTL endorsement: _____ For more than Two weeks	Date: _____
CTC final approval: _____	Date: _____

CTC Remarks, if any _____

NOTE: Leaves during campaign days are NOT allowed