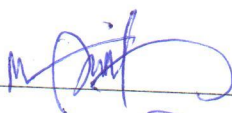
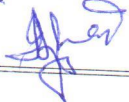


**CHIP Training and Consulting (Pvt) Ltd**  
LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	MUHAMMAD ARIF
Designation	UCPO
CNIC No.	16101-9809593-3
District/UC	BABENI
Leave application date	19-8-2020
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 type="checkbox"/> Emergency Leave
<input checked="" type="checkbox"/> Vacations	<input type="checkbox"/> Others
Number of Days Leave Applied for : <u>3 days</u>	
Leave start date: <u>20-8-2020</u>	Leave end date: <u>22-8-2020</u>
OIC Name and designation:	
Employee signature: 	Date: <u>19-8-2020</u>
PEO endorsement: 	Date: <u>19/08/2020</u>
PTL endorsement: For more than Two weeks	Date: _____
CTC final approval:	Date: _____

CTC Remarks, if any \_\_\_\_\_

**NOTE: Leaves during campaign days are NOT allowed**