

CRIF Training and Consulting (PVT) LTD
LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS

Employee Name	Qudrat ullah
Designation	UCPO
CNIC No.	11201-7692914-5
UC	Lakki marwat Landiwah
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 checked="" type="checkbox"/>	Emergency Leave
<input type="checkbox"/>	Vacations	<input type="checkbox"/>	Others FTS PST Test


Number of Days Leave Applied for: 01

Leave start 17/8/2020

Leave end 19/8/2020

OIC Name and designation:

Dr. Ihsan ullah PEO(WHO)

Employee signature: 

Date: 26/9/2020

PEO endorsement: _____

Date: _____

PTL endorsement: _____

For more than Two weeks

Date: _____

CTC final approval: _____

Date: _____