

CHIP Training and Consulting (Pvt) Ltd

LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Naseer khan
Designation	UCPO
CNIC No.	1120174389065
District/UC	Lakki, Shakh quli khan
Leave application date	20/8/2020

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 checked="" 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 type="checkbox"/> Vacations	<input type="checkbox"/> Others
Number of Days Leave Applied for 1day	
Leave start date 20/8/2020	Leave end date 21/8/2020
OIC Name and designation:	
Employee signature: _____ Naseer kha _____	Date: _____ 20/8/2020 _____
PEO endorsement: _____	Date: _____
PTL endorsement: _____ For more than Two weeks	Date: _____
CTC final approval: _____	Date: _____