

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

	SECTION 1: APP	LICANT'S DETAILS
Employee Name	Grid Hussain	
Designation	WOD	
CNIC No.	Sajid Hussain UCPO 21303-7638 Kurrun / B date 27/9/020	7079
District/UC	Kurm 12	n/Va
Leave application	date 27/9/22	761
	12/19/020	/
BEBALLANGE CONT.	SECTION 2: DE	TAILS OF LEAVE
	The state of the s	d for (Tick in appropriate box)
Hajj		Umrah/Ziarat
Chillah, Tableegh, Ehtikaf		Christmas, Diwali
1 Study/E	xams	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:		
Leave start date: 28/9/020 Leave end date: 29/9/020		
OIC Name and designation: Dr. Asfer al Shams (PEO)		
Employee signature:		Date: 27/9/02-0
	( profile	Date: 27-9-2020
PEO endorseme		
PTL endorsement For more than T	nt: wo weeks	Date:
CTC final appro	wal:	Date:

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