


SECTION 1: APPLICANT'S DETAILS	
Employee Name	Mushtaq Ahmed
Designation	UCPO
CNIC No.	11201-5939655-1
District/UC	Lakki Marwat/Lakki City 1
Leave application date	20/11/2020

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 checked="" 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 type="checkbox"/> Vacations	<input type="checkbox"/> Others
Number of Days Leave Applied for: 02	
Leave start : 20/11/2020	Leave end : 21/11/2020
OIC Name and designation: Dr. Waqar Ahmed PEO(WHO)	
Employee signature: 	Date: 19/11/2020
PEO endorsement: _____	Date: 19/11/2020
PTL endorsement: _____ For more than Two weeks	Date: _____