

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

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Khan Wali
Designation	UCPO
CNIC No.	21702-3470415-7
District/UC	UC Badar Tehsil Iadha SWTD
Leave application date	25/11/2020

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 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 checked="" type="checkbox"/> Others (KPPSC Test and ETEA Apply)
Number of Days Leave Applied for Two	
Leave start date 26/11/2020	Leave end date 27/11/2020
OIC Name and designation: Rehan Ud Din UCPO	
Employee signature: Khan Wali	Date: 25/11/2020
PEO endorsement: <i>Mus Afqan</i>	Date: 25/11/2020
PTL endorsement: _____ For more than Two weeks	Date: _____
CTC final approval: _____	Date: _____