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| **SECTION 1: APPLICANT’S DETAILS** |
| Employee Name | Robina Syed |
| Designation | UCPO |
| CNIC No. | 6110107389152 |
| District/UC | Islamabad-F 7  |
| Leave application date | 04-01-2021 |

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| **SECTION 2: DETAILS OF LEAVE** |
|   | Reason of Leave Applied for (Tick in appropriate box) |
|   |   |  | Hajj |  |  |  | Umrah/Ziarat |
|  |
|   |   |  | Chillah, Tableegh, Ehtikaf |  |  |  | Christmas, Diwali |
|  |
|   |   |  | Study/Exams |  |  |  | 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 |  |  |  |  |
|  |
| Number of Days Leave Applied for. |
| Leave start date. 04-01-2021 | Leave end date. 06-01-2021 |
| OIC Name and designation: |
|
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|
| Employee signature: Robina syed | Date: 04-01-2021 |
| PEO endorsement:\_\_\_\_\_\_\_\_\_\_Dr amna\_\_\_\_\_\_ | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| PTL endorsement:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_For more than Two weeks | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| CTC final approval:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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

**NOTE: Leaves during campaign days are NOT allowed**