


# CHIP Training and Consulting (Pvt) Ltd

## LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Abbar Hussain
Designation	TPO
CNIC No.	45205-7618345-3
District/UC	Khairpur / Kingri
Leave application date	17-10-2021

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
Number of Days Leave Applied for <u>03</u>	
Leave start date: <u>18-10-2021</u>	Leave end date: <u>20-10-2021</u>
OIC Name and designation:	
Employee signature: 	Date: <u>17-10-2021</u>
PEO endorsement:	Date:
PTL endorsement: For more than Two weeks	Date:
CIC final approval:	Date: