

# CHIP Training and Consulting (Pvt) Ltd

## LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Mushraf Ali
Designation	Union Council Polio Officer
CNIC No.	95302-4718896-3
District/UC	Nausheero Peroke, Kamal Dero
Leave application date	23/07/19 to 27/07/2019

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 checked="" 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 <u>05 Days</u>	
Leave start date <u>23/07/2019</u>	Leave end date <u>27/07/2019</u>
OIC Name and designation:	
Employee signature: <u>Mi</u>	Date: <u>19/07/2019</u>
PEO endorsement: <u>Recommended for approval.</u>	Date: <u>19-7-19</u>
PTL endorsement: _____	Date: _____
For more than Two weeks	Date: _____
CTC final approval: _____	Date: _____

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

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