

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

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Muhammad ishtiaq
Designation	UCPO
21203.3668891.7	
District/UC	Khyber / gani khel
Leave application date	23/07/2019

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 type="checkbox"/> Immediate Family-Sick Leave	<input type="checkbox"/> Accident/Sickness-while at work
<input type="checkbox"/> Accident/Sickness-while not at work	<input checked="" type="checkbox"/> Emergency Leave
<input type="checkbox"/> Vacations	<input type="checkbox"/> Others

Number of Days Leave Applied for. 07

Leave start date.24/07/2019

Leave end date.30/07/2019

OIC Name and designation:

Muhammad ishtiaq afridi

Employee signature: _____ muhd ishtiaq afridi



Date: 30/07/2019

PEO endorsement: _____

Dr. Q. Hayat

Date: 30/7/2019

PTL endorsement: _____

For more than Two weeks

Date: _____