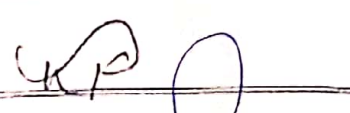
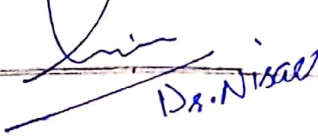


CHIP Training and Consulting (Pvt) Ltd LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Karam Elahi
Designation	Union Council Polio Officer
CNIC No.	12103-8642462-1
District/UC	Dera Ismail Khan/Dhap shumali
Leave application date	03-9-2019

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, Ehukaf	<input type="checkbox"/> Christmas, Diwali
<input checked="" 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 type="checkbox"/> Others
Number of Days Leave Applied for: 1	
Leave start date: 03/09/19	Leave end date: 03/9/19
OIC Name and designation:	
Employee signature: 	Date: 3-9-2019
PEO endorsement: 	Date: 02-09-2019
PTL endorsement: _____ For more than Two weeks	Date: _____
CTC final approval: _____	Date: _____

CTC Remarks, if any _____

NOTE: Leaves during campaign days are NOT allowed