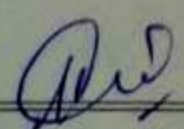
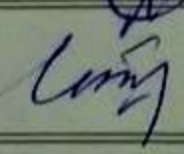


CHIP Training and Consulting (Pvt) Ltd
LEAVE APPLICATION FORM-PTTP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Akbar Hussain
Designation	UCTO
CNIC No.	21303-8974130-3
District/UC	Kurram/Shafiqan
Leave application date	2/03/2020

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: 03	
Leave start date: 03/03/2020	Leave end date: 05/03/2020
OIC Name and designation:	
Sajjid Hussain Baqash (TCSF)	
Employee signature: 	Date: 02/03/2020
PEO endorsement:  Try to be on duty on 5/3/20	Date: 03/03/2020
PTL endorsement: _____ For more than Two weeks	Date: _____
CTC final approval: _____	Date: _____

CTC Remarks, if any _____