

Leave Application Form

To
For UCMO

SUBJECT: Application for (Sick / Medical / Annual / wedding / Maternity / Domestic
Unpaid / Mat / Emergency) Leave
Note: Circle the type of leave

Respectfully, Madam,

It is stated that: Bilal Akhujada working as UCPO
in union council Safaid Dheri request for leave for a period of
1 days, starting from 4/8/2020 to 4/8/2020 on account of the
Subject cited above

Name: M. Bilal Akhujada

Designation: UCPO

Union Council: Safaid Dheri

Comments from UPEC Chairman:-

The above leave request is hereby Endorsed/Recommended
for approval with the comments that the proposed leave will
no affect the objective of the program and planned activities
during the requested leave period

Signature _____

Comments of AC FC/HRO/DHCSO:

UC BHU S...
Dis...
F...
D...

Signature _____