

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

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Kamran Khan
Designation	UCPO
CNIC No	12101-6422021-9
District/UC	Bannu / Kakki II
Leave application date	20/9/20

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"/> Chillab, Tabligh, Ehtikat	<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 checked="" 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</u>	
Leave start date <u>21/09/2020</u>	Leave end date <u>25/09/2020</u>
OIC Name and designation: <u>Muhammad Aslam Khan</u> <u>UCPO Kakki 1</u>	
Employee signature: <u>[Signature]</u>	Date: <u>20/9/20</u>
PEO endorsement: <u>Approved. [Signature]</u> - PEO	Date: <u>21/9/20</u>
PTL endorsement: _____ For more than Two weeks	Date: _____
CTC final approval: _____	Date: _____

CTC Remarks, if any _____

NOTE: Leaves during campaign days are NOT allowed