
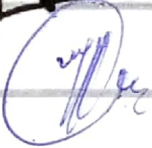


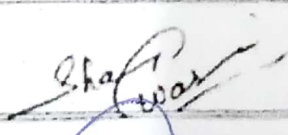

**CHIP Training and Consulting (Pvt) Ltd**  
LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Waseem Akram
Designation	UCPO
CNIC No.	14102-0365320-9
District/UC	Hangu, Thal Rural
Leave Application date	25-09-2020

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, Tablesgh, Ehtikaf	<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 day	
Leave start date: 26-09-2020	Leave end date: 26-09-2020
Employee signature: 	Date: 25-09-2020
PEO endorsement: 	Date: 25/9/20
PTL endorsement: _____ For more than Two weeks	Date: _____
CTC final approval: _____	Date: _____

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

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Shahid Wasim
Designation	UCPo
CNIC No	14101-5551577-5
District/UC	Hanyu, Darsamand
Leave application date	26-9-2020

SECTION 2: DETAILS OF LEAVE	
Reason of Leave Applied for (Tick in appropriate box)	
<input type="checkbox"/> Hajj	<input type="checkbox"/> Umrah/Zarat
<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 type="checkbox"/> Emergency Leave
<input type="checkbox"/> Vacations	<input checked="" type="checkbox"/> Others
Number of Days Leave Applied for <u>one day</u>	
Leave start date <u>26-9-2020</u>	Leave end date <u>26-9-2020</u>
OIC Name and designation	
Employee signature: 	Date: <u>26/9/20</u>
PEO endorsement: 	Date: <u>26/9/20</u>
PTL endorsement: For more than Two weeks	Date:
CTC final approval:	Date:

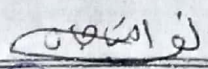
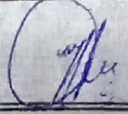
CTC Remarks, if any \_\_\_\_\_

**NOTE: Leaves during campaign days are NOT allowed**



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

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Nasrullah Jan
Designation	UC PO
CNIC No.	42201-3412392-1
District/UC	Hangu, Karbogha Sharif
Leave application date	26-09-2020

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 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 checked="" type="checkbox"/> Others Annual Leave
Number of Days Leave Applied for	02
Leave start date	28-09-2020
Leave end date	29-09-2020
OIC Name and designation:	
Employee signature: 	Date: 26-9-2020
PEO endorsement: 	Date: 26/9/2020
PTL endorsement: _____ For more than Two weeks	Date: _____
CTC final approval: _____	Date: _____

CTC Remarks, if any \_\_\_\_\_

NOTE: Leaves during campaign days are NOT allowed





**CHIP Training and Consulting (Pvt) Ltd**

LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Ghulam Qadir Khan
Designation	UCPO
CNIC No.	14101-9229871-5
District/UC	Hangu / Torawari
Leave application date	01/10/2020

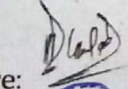
SECTION 2: DETAILS OF LEAVE	
Reason of Leave Applied for (Tick in appropriate box)	
<input type="checkbox"/> Hajj	<input type="checkbox"/> Umrah/Ziarat
<input type="checkbox"/> Chillah, Tableegh, Ehtikaf	<input type="checkbox"/> Christmas, Diwali
<input type="checkbox"/> Study/Exams	<input type="checkbox"/> 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: Casual leave

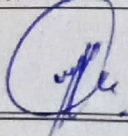
Number of Days Leave Applied for = 03

Leave start date 01/10/2020

Leave end date 03/10/2020

OIC Name and designation:

• Employee signature:  Date: 01/10/2020

PEO endorsement:  Date: 1/10/20

PTL endorsement: \_\_\_\_\_ Date: \_\_\_\_\_

For more than Two weeks \_\_\_\_\_ Date: \_\_\_\_\_

CTC final approval: \_\_\_\_\_ Date: \_\_\_\_\_

CTC Remarks, if any \_\_\_\_\_

**NOTE: Leaves during campaign days are NOT allowed**