

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Asghar khan
Designation	UCPO
CNIC No.	12101-2763270-5
District/UC	DIK/KhoiBahara
Leave application date	10/9/2020

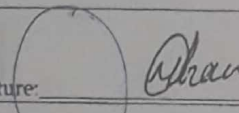

SECTION 2: DETAILS OF LEAVE	
Reason of Leave Applied for (Tick in appropriate box)	
<input type="checkbox"/> Hajj	<input type="checkbox"/> Umrah/Ziarat
<input type="checkbox"/> Chillah, Tableegh, Ehtikaf	<input type="checkbox"/> Christmas, Diwali
<input type="checkbox"/> Study/Exams	<input type="checkbox"/> 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 type="checkbox"/> / Others .Interview in peshawar
Number of Days Leave Applied for _____	
Leave start date, 11/9/2020	Leave end date, 12/9/2020
OIC Name and designation: _____	
Employee signature: _____ asghar khan	Date: 10/9/2020
PEO endorsement: _____ DR ASMAT <i>D. Nisara</i>	Date: 10-09-2020
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	Muhammad Ishaq
Designation	Union Council Polio Officer
CNIC No.	1201-5777489-5
District/UC	Dera Ismail Khan. HASSAM
Leave application date	18-8-2020

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: 3	
Leave start date: 24-8-2020	Leave end date: 25-8-2020
OIC Name and designation:	
Employee signature: 	Date: 18-8-2020
PEO endorsement: 	Date: 18-08-2020
PTL endorsement: For more than Two weeks	Date:
CTC final approval:	Date:

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

NOTE: Leaves during campaign days are NOT allowed