



CHIP Training and Consulting (Pvt) Ltd

LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Muhammad Arshad
Designation	CCPO
CNIC No.	21407-5160120-7
District/UC	Mohammad Umar Khan Lower
Leave application date	15 to 16 Oct 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 _____	
Leave start date 15/10/20	Leave end date 16/10/20
OIC Name and designation: _____	
Employee signature: 	Date: 14/10/2020
<i>Recommended for approval please</i>	Date: 
PEO endorsement: _____	Date: _____
PTI endorsement: _____	Date: _____
For more than Two weeks _____	Date: _____
CTC final approval: _____	Date: _____

CTC Remarks, if any _____