|  |
| --- |
| **SECTION 1: APPLICANT’S DETAILS** |
| Employee Name | Kamran Zahid |
| Designation | UC/Polio Officer |
| CNIC No. | 37405-9679042-3 |
| District/UC | CT-10 B, Rawalpindi Cantt |
| Leave application date | December26, 2020 |

|  |
| --- |
| **SECTION 2: DETAILS OF LEAVE** |
|   | Reason of Leave Applied for (Tick in appropriate box) |
|   |   |  | Hajj |  |  |  | Umrah/Ziarat |
|  |
|   |   |  | Chillah, Tableegh, Ehtikaf |  |  |  | Christmas, Diwali |
|  |
|   |   |  | Study/Exams |  |  |  | Maternity |
|  |
|   |   |  | Family Wedding |  |  |  | Self-Wedding |
|  |
|   |   |  | Immediate Family Death |  | * z
 |  | Self-Sick Leave |
|  |
|   |   |  | Immediate Family-Sick Leave |  |  |  | Accident/Sickness-while at work |
|  |
|   |   |  | Accident/Sickness-while not at work |  |  |  | Emergency Leave |
|  |
|   |   |  | Vacations |  |  |  | Others |
|  |
| Number of Days Leave Applied for: 01Day |
| Leave start date: December 26, 2020 | Leave end date: December 26, 2020 |
| OIC Name and designation: |
|
|
|
| SignatureEmployee signature: Kamran Zahid | Date: December 26, 2020 |
| PEO endorsement:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| PTL endorsement:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_For more than Two weeks | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| CTC final approval:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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