

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

| Employee Name                         | SECTION 1: APPLICANT'S DETAILS |                                       |
|---------------------------------------|--------------------------------|---------------------------------------|
| Designation                           | Arshad Klian                   | , , , , , , , , , , , , , , , , , , , |
| CNIC No.                              | 17301-2650747-5                |                                       |
| District/UC<br>Leave application date | Perhawar / Shoik ban.          |                                       |
| dipplication date                     | 26/12/2020                     |                                       |

| SECTION 2: DETAILS OF LEAVE                           |                                 |  |  |
|---|---------------------------------|--|--|
| Reason of Leave Applied for (Tick in appropriate how) |                                 |  |  |
| Hajj  | Umrah/Ziarat                    |  |  |
| Chillah Tablaach Elett                                |                                 |  |  |
| Tableegh, Entikat                                     | Christmas, Diwali               |  |  |
| Study/Exams   | Maternity                       |  |  |
| Family Wedding  | Self-Wedding                    |  |  |
| Immediate Family Death                                | 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 1                    |                                 |  |  |
| Leave start date 26 12 2020                           | Leave end date 26/12/2020       |  |  |
| OIC Name and designation: J2hor UCDO                  |                                 |  |  |
| Employee signature:                                   | Date: 26/12/200                 |  |  |
|   |                                 |  |  |
| PEO endorsement:                                      | Date:                           |  |  |
|   |                                 |  |  |
| PTL endorsement:                                      |                                 |  |  |
| For more than Two weeks                               | Date:                           |  |  |
|   |                                 |  |  |
| CTC final approval:                                   | Date:                           |  |  |

CTC Remarks, if any