|  |
| --- |
| **SECTION 1: APPLICANT’S DETAILS** |
| Employee Name | Noman Ijas  |
| Designation | UCPO  |
| CNIC No. | 37405-30454187 |
| District/UC | I-11 CDA ISB  |
| Leave application date | 05-01-2021 |

|  |
| --- |
| **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 |  |  | \* | Self-Sick Leave |
|  |
|   |   |  | Immediate Family-Sick Leave |  |  |  | Accident/Sickness-while at work |
|  |
|   |   |  | Accident/Sickness-while not at work |  |  |  | Emergency Leave |
|  |
|   |   |  | Vacations |  |  |  |  |
|  |
| Number of Days Leave Applied for. 01 |
| Leave start date.  | Leave end date. 05-01-2021 |
| 05-01-2021OIC Name and designation: |
|
|
|
| Employee signature: Noman Ijaz | Date:  |
| PEO endorsement:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| PTL endorsement:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_For more than Two weeks | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| CTC final approval:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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

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

