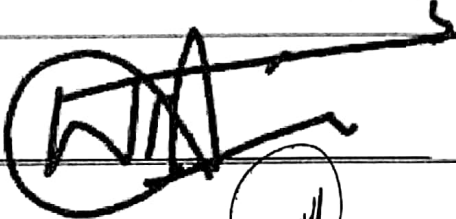
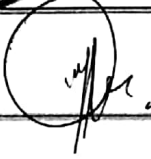


**CHIP Training and Consulting (Pvt) Ltd**  
**LEAVE APPLICATION FORM-PTPP Project**

| SECTION 1: APPLICANT'S DETAILS |                   |
|--------------------------------|-------------------|
| Employee Name                  | Waseem Akram      |
| Designation                    | UCPO              |
| CNIC No.                       | 14102-0365320-9   |
| District/LIC                   | Hangu, Thal Rural |
| Leave                          |                   |
| Application date               | 26-12-2020        |

| 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"/> Chullah, Tableegh, Ehtikaf   | <input type="checkbox"/> Christmas, Diwali               |
| <input checked="" 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 checked="" type="checkbox"/> Emergency Leave      |
| <input type="checkbox"/> Vacations  | <input type="checkbox"/> Others                          |
| Number of Days Leave Applied for: 4 days  |  |
| Leave start date: 28-12-2020  | Leave end date: 31-12-2020                               |
| Employee signature:  | Date: 26-12-2020   |
| PFO endorsement:     | Date: 26/12/2020   |
| PTL endorsement: _____  | Date: _____  |
| For more than Two weeks   | Date: _____  |