

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

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Ashfaqe Ahmed
Designation	UCPO
CNIC No.	45302-6751571-3
District/UC	Khairpur/ Akri
Leave application date	20/01/2021

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 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 type="checkbox"/> Emergency Leave
<input type="checkbox"/> Vacations	<input type="checkbox"/> Others
Number of Days Leave Applied for Three days.	
Leave start date 21/01/2021-	Leave end date 23/01/2021
OIC Name and designation:	
Employee signature: <u>Ashfaqe Ahmed</u> <i>AH</i> Date: 20-01-2021	
PEO endorsement: <i>Dr. Sundeep</i> <i>Co-ordinator</i> <i>(Solely)</i> Date: 21/01/21	
PTL endorsement: _____ Date: _____	
For more than Two weeks	
CTC final approval: _____ Date: _____	

CTC Remarks, if any _____

NOTE: Leaves during campaign days are NOT allowed