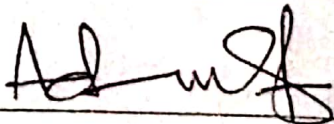


# CHIP Training and Consulting (Pvt) Ltd

## LEAVE APPLICATION FORM-PTPP Project

| SECTION 1: APPLICANT'S DETAILS |                 |
|--------------------------------|-----------------|
| Employee Name                  | Adnan Umran     |
| Designation                    | CCPO            |
| CNIC No.                       | 41401-5371848-5 |
| District/UC                    | Mulla - Garho   |
| Leave application date         | 28-4-2021       |

| 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 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"/>                                 |
| Number of Days Leave Applied for. <span style="float: right;">01</span>                                 |  |
| Leave start date. 29-4-2021   | Leave end date. 29-4-2021                                |
| OIC Name and designation:   |  |
| Employee signature:  | Date: 28-4-2021  |
| PEO endorsement: _____  | Date: _____  |
| PTL endorsement: _____<br>For more than Two weeks   | Date: _____  |
| CTC final approval: _____   | Date: _____  |

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

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