

CHIP Training and Consulting (Pvt) Ltd

LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Saifud-Din
Designation	U.C.P.O.
CNIC No.	21707-4725643-9
District/UC	S.W.T.D. U.C. Gulkech
Leave application date	23-11-2021

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 checked="" 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 4	
Leave start date.. 24-11-2021	Leave end date.. 27-11-2021
OIC Name and designation:	
Employee signature: <u>[Signature]</u>	
Date: 23-11-2021	
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