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

SECTION 1: APPLICANT'S DETAILS

Employee Name	SAFIR ULLAH
Designation	UCPO
CNIC No.	21501-6081986-1
District/UC	Datta Khel II
Leave application date	27/1/022

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	☐	Others

Number of Days Leave Applied for __3 days__

Leave start date __27/1/022__ Leave end date __29/1/022__

OIC Name and designation:

Sibghat ullah ucpo.

Employee signature:_____	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