

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

SECTION 1: APPLICANT'S DETAILS	
Employee Name	NAJIBA
Designation	UCPO
CNIC No.	21303-4574478-0
District/UC	Kurram / shingak
Leave application date	19-08-2019

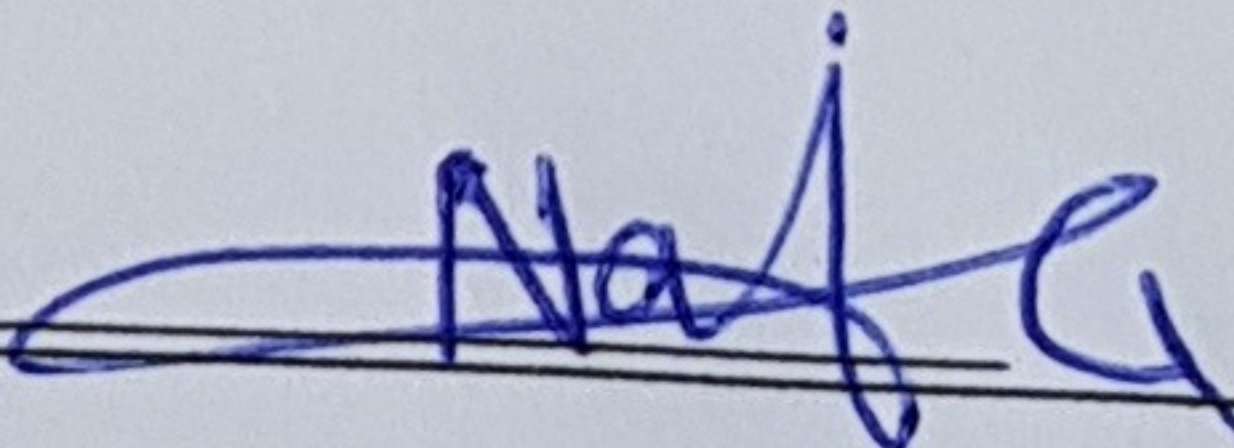
SECTION 2: DETAILS OF LEAVE	
Reason of Leave Applied for (Tick in appropriate box)	
<input type="checkbox"/> Hajj	<input type="checkbox"/> Umrah/Ziarat
<input type="checkbox"/> Chillah, Tableegh, Ehtikaf	<input type="checkbox"/> Christmas, Diwali
<input checked="" type="checkbox"/> 1 Study/Exams	<input checked="" 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: 20 Days

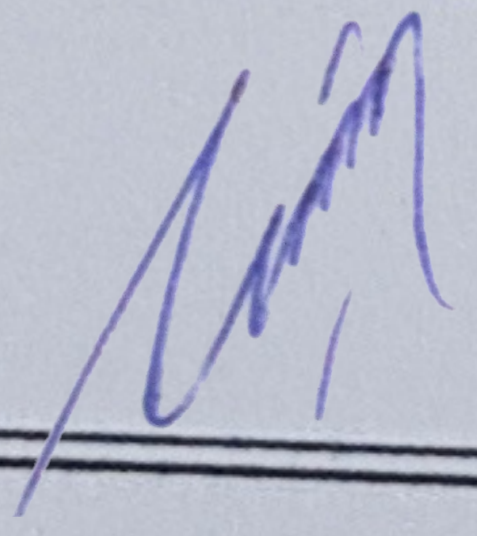
Leave start date: 30-08-2019

Leave end date: 18-09-2019

OIC Name and designation: **Dr Asfar U Shams, PEO.**

Employee signature: 

Date: 19-08-2019

PEO endorsement: 

Date: **28-8-2019**

PTL endorsement: _____
For more than Two weeks

Date: _____

CTC final approval: _____

Date: _____

CTC Remarks, if any _____

NOTE: Leaves during campaign days are NOT allowed