

Government of Pakistan Cabinet Division (Leave Application Form)

Subject					
Justification					
Duration	From		То		Days
Station Leave Required	Yes		No	•	
	From _		То	·	
	Ph No _		Ce	ell No	
Leave Address & Contact Information					
(In Case of Station Leave)					
				(Signa	ature) Concerned
		ı	Name		
		ı	Designation		
			_		
			_		
		·	Siometric ID		
Reporting Officer (Name / Designation)					
Recommended	N	ot Recomme	nded	Fo	rwarding Officer
Approved	R	ejected		- Com-	tioning Authorities
Forward to IT Cente	\ r				tioning Authority Secy I / II / III
Forward to 11 Cente	71				