



COMSATS Internet Services,
Corporate Office / Islamabad Node
administration@comsats.net.pk

No. CIS-Admin-03

LEAVE APPLICATION

Application Date: ____/____/____

Names: _____

Designation: _____ Department: _____

Nature of Leave: Casual ☐ LFP ☐ Half Pay ☐

Leave Applied From: _____ To _____ No. of Days _____

Reason: _____

Address During Leave: _____

Phone # During Leave: _____

Signature of Applicant: _____

Recommendations of the Officer Incharge

Name and Designation: _____

Date: _____

Leave Already Availed

Leave at Credit

C.L	L.F.P

Approved / Not Approved

Signature of Admin Assistant
Accountant / Jr. Accountant

Signature of Sanctioning Authority