

Employee Request for Annual Leave

Employe	ee Name:	an Gu	lde	cott		
I reques	t PAID leave fro	m work as	follo	A/S:		
			,01101			
Commer	ncing: 12	Decen	160	21 22		
Ending:	_13	Dece	ul	bes 22		
Number	of days to be ta	ıken:		2		
		* 8		* *		· · · · · · · · · · · · · · · · · · ·
I request	: UNPAID leave	from work	as fo	llows:		
Commen	icing:					
Ending:	2					
Number	of days to be ta	ken:		· ·		
Please N no unpai	ote: Unpaid le d leave can be	ave <u>cannot</u> taken witho	be to out th	iken until all leave e ne prior authorisation	ntitlement is n of Richard o	used up and or Martin.
Employe	e's Signature:	lar	Gi	A	JWS SPE	CIALIST JOINERY LTD
Authorised by:						0 NOV 2922
J.R. Hayhoe:					ACTION COPIES	
M. O'Brien:					Office use only: Days remaining	
DOCUMENT REFERENCE: DOCUMENT OWNER:	ADM-FM-001 HOLIDAY REQUEST FORM DS	VERSION NO:	1.1	CREATION DATE: LAST REVISION DATE: NEXT REVIEW DATE:	27/03/2013 22/12/2021 TBC	Page 1 of 1