Employee Request for Annual Leave

Employee Name:AM CHMC	
CANCEL I request PAID leave from work as follows:	
Commencing: 17TH SAT 2021	
Ending:	
Number of days to be taken:	
I request UNPAID leave from work as follows:	
Commencing:	
Ending:	
Number of days to be taken:	
Please Note: Unpaid leave <u>cannot</u> be taken until all leave en no unpaid leave can be taken without the prior authorisation	
Employee's Signature:	
Authorised by:	
R.C. Hayhoe:	
M. O'Brien: :	Office use only: Days remaining