

## Employee Request for Annual Leave

Employ	ee Name:	MIGHARL	ALIA.		
Ireques	t PAID leave fr	om work as fol	lows:		
Comme	ncing: 2k				
Ending:		ik sep	T 22		
Number	of days to be to	aken: 4			
Ireques	t UNPAID leave	from work as j	follows:		
Commer	ncing:	-			
Ending:		· · · · · · · · · · · · · · · · · · ·	2		
	of days to be ta		taken until all leave	entitlement is u	cod un and
			the prior authorisat		
		. 4 1			
Employe	e's Signature:	MUTACO	h/A		
Authoris	ed by:				
				-	
J.R. Hayl	noe:				
M. O'Brid	en:			Office use o Days remain	
DOCUMENT REFERENCE:	ADM-FM-001 · HOLIDAY REQUEST	VERSION NO: 1.1	CREATION DATE: LAST REVISION DATE:	27/03/2013 22/12/2021	Page 1 of 1