

## Employee Request for Annual Leave

	Employe	ee Name: _	Marian	Jon	5					
	l reques	t PAID leave j	irom work a	s follor	vs:					
	Commer	ncing:28	a Septi	ingbel						
	Ending:	2.8	Septi	enber		_				
	Number	of days to be	taken:	ols	¥					
	l request	: UNPAID leav	e from worl	k as foi	lows:					
	Commen	cing:	-			_				
	Ending:	8.2		_		_				
	Number	of days to be	taken:		<i>i</i> e	8				
	Please No no unpai	ote: Unpaid d leave can bo	leave <u>canno</u> e taken with	<u>t</u> be ta out th	ken until all e prior auth	l leave en orisation	titlement i of Richard	s used up or Marti	and 7.	
	Employee	e's Signature:	A			L This a	SECIALIST	journer l		
	Authorise	ed by:		1			27 SE	P 2022		
								Cabien	AA	
	J.R. Hayh	oe:				ACT			OW	* .
	M. O'Brie	en:			es-may"	9 n	Office use Days rem		2	
DOCUMENT	REFERENCE:	ADM-FM-001 HOLIDAY REQUEST	VERSION NO:	. 11	CREATION DATE		27/03/2013	T	Page 1 of 1	