

Employee Request for Annual Leave

	Employee	Name: No	ithan	W	Interburh			
	I request I	PAID leave froi	n work as f	ollou	vs:			
	Commenc	25/03 25/03	/22					•
		,	1					
	Number o	of days to be tal	ken:	do	ry			
	l request (UNPAID leave j	from work (as fol	lows:			
	Commenc	cing:						
, , , , , , , , , , , , , , , , , , ,	Ending:		/	/		* *		
	Number o	of days to be tal	ken:					
*					ken until all leave en e prior authorisation			
						JAMSS	PECIALIS	TJOINERYLTD
	Employee	's Signature: 🛦	M					JOINERYLTD
*	Authorise	d by:			 	ACTION	22 MAR	2022
	J.R. Hayh	oe:		à				
	M. O'Brie	n:		······		Office use Days rema		<u> </u>
DOCUMENT	REFERENCE:	ADM-FM-001 HOLIDAY REQUEST FORM	VERSION NO:	1.1	CREATION DATE: LAST REVISION DATE: NEXT REVIEW DATE:	27/03/2013 22/12/2021 TBC		Page 1 of 1

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