Employee Request for Annual Leave

Employee Name: _	A-BARLOW	j		
		•		• .
I request PAID leave	from work as follows:		•	
		.		
Commencing:	16/10/2018			
Ending:			• • •	
Number of days to b	e taken;			
I request UNPAID le	ave from work as follows	:	,	
Commencing:				: .
Ending:				
Number of days to b	oe taken:	· .		
			• •	
	id leave <u>cannot</u> be taken 1 be taken without the pr	•	-	
				,
Employee's Signatu	ire: AG C Ku	h		
Authorised by:	I bull	a_ c~~		
radionica by		•		•
R.C. Hayhoe:				
M. O'Brien: :	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Office use only: Days remaining	ζ.
	•	•	/	