

Employee Request for Annual Leave

	Employee	e Name:	Ano	dy	Barlow	·			
	l request	PAID leave fro	m work as f	ollou	/s:				
	Commend	cing: <u>Fnd</u>	24 22 nd	. Ay	ovil 122				
	Ending:	ene day	s hollida	y to	be returned a	o he was	working		
	Number of days to be taken: an a No Work Friday (4DW)								
	l request	UNPAID leave	from work o	as f ol i	lows:				
	Commend	cing:							
	Ending: Number o	of days to be tal	cen:						
		8			ken until all leave en e prior authorisation			*	
	Employee	's Signature:			Jest 8	SPECIALIST JO	DINERY LTD		
	Authorise	ed by:				27 APR 2	322		
J.R. Hayhoe:								£.	
							use only: emaining		
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 :	l of 1	

DOCUMENT OWNER: