

## **Employee Request for Annual Leave**

Employee	Name:	A-BA	HRCO	المان				
l request i	PAID leave from	n work as fo	ollow	s:				
Commend	ing: Z	5/03/	20	27_				
Ending:				· ·				
Number o	f days to be tak	en:	1					THE COLUMN
l request	UNPAID leave ĵ	rom work a	ıs foll	ows:				
Commend	ing:							
Ending:				*				
Number o	f days to be tak	en:						
				ken until all leave er e prior authorisatior				
Employee	's Signature:	AB	_{ (		JMS SPECI	ALIST JOIN	JERY LTD	
Authorise	d by:	1. Cu	4		. 8	MAR 2022	!	
J.R. Hayh	oe:				ACTION	COMP	<b>D</b>	2
M. O'Brie	n:				Office use Days rema	-	_13	
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	P	age 1 of 1	_