

Employee Request for Annual Leave

Employ	vee Name:	EE D	212A	N				
l reque	st PAID leave fr	om work as	follov	vs:		×		
Comme	ncing: F7			V 2022				
Ending:	Fn	/)\	NO	V 2022				
Numbei	of days to be t	aken:	1	· · · · · · · · · · · · · · · · · · ·				
l reques	t UNPAID leave	from work	as fol	lows:				
Comme	ncing:							
Ending:			/					
Number	of days to be to	aken:						
Please N no unpa	lote: Unpaid le id leave can be	eave <u>cannot</u> taken witho	be tal	ken until all leave e prior authorisat	entitlement is ion of Richard (used up and or Martin.		
Employe	e's Signature:	G/2	/	<u></u>	IMS SPECIALIST	JOINERY LTD		
Authoris	ed by:		***************************************		, 8 NOV	2322	8	
J.R. Hayh	noe:	••••••	••••••	ACT	ION CO	PIES		
	M. O'Brien:					Office use only: Days remaining		
DOCUMENT REFERENCE: DOCUMENT OWNER:	ADM-FM-001 HOLIDAY REQUEST FORM DS	VERSION NO:	1.1	CREATION DATE: LAST REVISION DATE: NEXT REVIEW DATE:	27/03/2013 22/12/2021 TBC	Page 1 of	1	