

Employee Request for Annual Leave

	Employee	Name: LE	E DOR	42				
	I request I	PAID leave from	n work as fo	llow	s:			
	Commenc	ing: 14	APRIL		2027			
	Ending:	19	APRIL		2072			
	Number o	f days to be tak	en: 2					
		* - * * * * * * * * * * * * * * * * * *						
	I request (JNPAID leave j	rom work a	s foll	ows:			
	Commenc	ing:	ş			e.		
	Ending:							
	Number	f days to be tal	en:			V.		
	wanner o	r days to be tal						
	Please No	te: Unpaid led	ave <u>cannot</u> i	be ta	ken until all leave er	ntitlement is u	ısed up an	d
	no unpaid	l leave can be t	aken witho	ut the	e prior authorisation	of Richard o	r Martin.	
	Employee	's Cianatura	1/2	n s		and the	Later vol.	
	Employee	's Signature:	1	*********			JAN JUNE	RYLID
	Authorise	d hy:	4/1			20 J	AN 2022	
	Authorise	a by		••••••	···	and the same of th	this fall	
	J.R. Hayh	ne.	* .			100	180	2
*								
	M. O'Brien:					Office use only: Days remaining 25		
						Days Tellia	iong .	
DOCUMENT	F COMMEN	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	Pa	ige 1 of 1