

## Employee Request for Annual Leave

Employee	Name:	SE DO	RA	$\sim$	#	
I request P	AID leave fron	n work as fo	llows	5 <i>:</i>		
Commenci	ng:_ <i>TUE</i>	29	MA	2 2022		
Ending:	WED	30	m1	2 2027		
Number of	f days to be tak	en:				
I request L	JNPAID leave f	rom work a	s foll	ows:		
Commenci	ing:		/			
Ending:	-	_/_				
Number o	f days to be ţak	ken:				
Please No no unpaid	te: Unpaid led leave can be t	ave <u>cannot</u> k aken witho	e ta ut the	ken until all leave en e prior authorisation	ntitlement is u n of Richard o	sed up and Martin.
Employee	's Signature:	Um	<b></b>	· · · · · · · · · · · · · · · · · · ·	- Times	PEC
Authorise	d by:				1	PECIALIST JOINERY LTD
J.R. Hayh	oe:			· · ·	ACTION	100
M. O'Brie	n:				Office use Days rema	
NT REFERENCE:	ADM-FM-001 HOLIDAY REQUEST	VERSION NO:	1.1	CREATION DATE: LAST REVISION DATE:	27/03/2013 22/12/2021	Page 1 of 1

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
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