

Employee Request for Annual Leave

	Employee	Name:	John	90	wd		
	l request l	PAID leave fron	n work as fo	llow	s:		
	Commenc	ing: <u>24</u> &	25 Aug	just	5 2022		
9	Ending:	25 Augus	st 22 80	ont.	uung win horida	y previousi	j booked.
		f days to be tak					
	l request l	JNPAID leave f	rom work a	s foll	ows:		
	Commenc	ing:					
	Ending:						
£	Number o	f days to be tak	en:				
	Please No no unpaid	te: Unpaid led l leave can be t	ive <u>cannot</u> k aken witho	be ta ut th	ken until all leave en e prior authorisation	titlement is u of Richard o	sed up and Martin.
8	Employee	's Signature:	J. Ca	1		JMS SPEC	IALIST JOINERY LTO
	Authorise	d by:				- 4	JAN 2022
J.R. Hayhoe:							
	M. O'Brien:					Office use only: Days remaining 12 Welles Company	
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