

Employee Request for Annual Leave

	Employe	e Name:	JOSE	PH	MSHAR	RY		•
	l request	PAID leave fro						
		cing: <u>6/</u> 5	1/20					
	Ending:	cing.		•				
	Number o	of days to be ta	ken:)				
	l request	UNPAID leave	from work	as fo i	llows:			
	Commend	cing:	, is		/			
	Ending:	,						
	Number o	of days to be ta	ken:					
	Please No no unpaid	ite: Unpaid le I leave can be i	ave <u>cannot</u> taken witho	be ta out th	ken until all leav e prior authorisa	e entitlement tion of Richard	is used up d or Marti	and in.
	Employee	's Signature:	5.14	2	lang	JM	S SPECIAL	IST JOINERY LTD
g.	Authorise	d by:					. 8 MAK	2020 A
	J.R. Hayho	oe:				ACTION		TES
*	M. O'Brie	n:		······································		Office us Days ren	se only:	3
DOCUMENT F	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		Page 1 of 1