

## Employee Request for Annual Leave

	Employe	ee Name:	Jose	ph	M'Slan				
	Trequest	t PAID leave fro	om work as	follo	ws:				
	Commen	ncing: <u>25</u>	/2/-	2 0	2				
	Ending:			uri	» *				
	Number	of days to be ta	ıken:	1		8	8		
	l request	UNPAID leave	from work	as fo	llows:			w 10	
	Commen	cing:	· ·						
	Ending:	,		/					
	Number	of days to be ta	ken:						
	Please Note: Unpaid leave <u>cannot</u> be taken until all leave entitlement is used up and no unpaid leave can be taken without the prior authorisation of Richard or Martin.								
	Employee	e's Signature:	J. M	5	long	JMS SF	PECIALIS	T JOINERY LTI	Či
	Authorise	ed by:	4	•••••	<b></b>		2 FEB	2022	
	J.R. Hayh	oe:	••••••			ACTION	có	PIES	
M. O'Brien:						Office use only: Days remaining			
DOCUMENT		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	