



Employee Request for Annual Leave

Employee Name: GLYN WARD

I request PAID leave from work as follows:

Commencing: 8 AUG 22

Ending: _____

Number of days to be taken: 1

I request UNPAID leave from work as follows:

Commencing: _____

Ending: _____

Number of days to be taken: _____

Please Note: Unpaid leave cannot 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's Signature: [Signature]

Authorised by: [Signature]

JMS SPECIALIST JOINERY LTD	
4 AUG 2022	
ACTION	COPIES

J.R. Hayhoe:

M. O'Brien:

Office use only:
Days remaining 7

DOCUMENT REFERENCE:	ADM-FM-001 HOLIDAY REQUEST FORM	VERSION NO:	1.1	CREATION DATE:	27/03/2013	Page 1 of 1
DOCUMENT OWNER:	DS			LAST REVISION DATE: NEXT REVIEW DATE:	22/12/2021 TBC	