

Employee Request for Annual Leave

Employee Name: 5 WRICHT	<u> </u>
I request PAID leave from work as follows:	
Commencing: 5.10.21	
Ending:	
Number of days to be taken:	4
I request UNPAID leave from work as follows:	
Commencing:	
Ending:	
Number of days to be taken:	
Please Note: Unpaid leave <u>cannot</u> be taken until all leave ent no unpaid leave can be taken without the prior authorisation	
	1.000
Employee's Signature:	SOEOJALIST JOINERY LYS
	A Prus
Authorised by:	-4 OCT 2000
	LASTION Y ()
J.R. Hayhoe:	10000
M. O'Brien:	Office use only:
	Days remaining
REFERENCE: ADM-FM-001	

DOCUMENT 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
DOCUMENT OWNER:	DS	2 10 10 10 10				