

## Employee Request for Annual Leave

Employee	Name:	5. in	R	aUT				
Employee								
	AID leave from	.22	1,2	4.27				
Commenci	ng: 25 3.	22	8.4	+ 22				
Ending:		4	~					
Number of	days to be tak	en:		<del> </del>				
l request L	INPAID leave f	rom work as	follo	ows:				
Commenci	ng:					,		
Ending:	. А							
Number o	f days to be tak	en:						
Please No no unpaid	te: Unpaid lea leave can be t	ive <u>cannot</u> b aken withou	e tal it the	ken until all leave o prior authorisatio	entitlen on of Ri	nent is u chard o	sed up e Martin	and
Employee	's Signature:	<u> </u>	/		JMS S	PECIALI	ST JOINE	RYLTD
Authorise	d by:			AC	TION	TO MAI	2022	
J.R. Hayho	oe:					Co	West -	
M. O'Brie	n:		•••••			ice use /s rema		7.
r_ ex								
OCUMENT REFERENCE:	ADM-FM-001 HOLIDAY REQUEST FORM	VERSION NO:	1.1	CREATION DATE: LAST REVISION DATE: NEXT REVIEW DATE:	27/03/ 22/12/ TBC		- 8	Page 1 of 1