Employee Request for Annual Leave

Employ	ee Name:	Sil	~ K	PIUHT			
l reques	st PAID leave fi	om work as	s follo	ws:			
Comme	ncing: 2	4.2		23			
Ending:							
Number	of days to be t	aken:	1				
l reques	t UNPAID leave	e from work	as fo	llows:			
Commer	ncing:						
Ending:			_				
Number	of days to be ta	aken.					
Please N no unpai	ote: Unpaid le id leave can be	ave <u>cannot</u> taken with	be to	aken until all leave e ne prior authorisatio /	entitlement is en of Richard (used up and or Martin.	
Employe	e's Signature:				JMSS	PECIALIST JOINERY LTD	
Authorise	ed by: .{}	II la	1	<u>//</u>	1	6 FEB 2023	
J.R. Hayhoe:						CORIES	
M. O'Brien:					Office use only: Days remaining		
DOCUMENT REFERENCE:	ADM-FM-001 HOLIDAY REQUEST FORM	VERSION NO:	1.1	CREATION DATE: LAST REVISION DATE:	27/03/2013 22/12/2021	Page 1 of 1	