**Employee Leave Request Form**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** |  | | | **ID #** |  | | | |
| **Job Title** |  | | | **Dept** |  | | | |
| **Type of Leave** | | | | | | | | |
|  | | | | | | | | |
| **Employee Remarks** (Attach Required Documents) | | | | | | | | |
|  | | | | | | | | |
| **Leave Details** | | | | | | | | |
| Leave Applied From | |  | To |  | | | # of days |  |
| **Contact Details** | | | | | | | | |
| Address while on leave | |  | | | | | | |
| Telephone (Local) | |  | Email |  | | | | |
| **For HR use only** | | | | | | | | |
| Leave Balance | |  | Remaining balance | | |  | | |
|  | **Employee** | | **Head of Department** | | | | **Human Resources** | |
| **Signature** |  | |  | | | |  | |
| **Name** |  | |  | | | |  | |
| **Date** |  | |  | | | |  | |
| **HR Comments:** | | | | | | | | |