

#### RECOMMENCEMENT OF DUTY REPORT

To	*	<b>Chief Operations</b>	Officer/Administration	Manager
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Date : ///09/2017

### **DUTY REPORT - RETURN FROM LEAVE**

Name of Employee : K.K. Sanjeewa Prasanga

Emp. Code No. : 13

Department : Q.S.

Place of Work : Salalah - Airport - MCS

Leave taken From: 5/09/2017. To: 10/09/2017.

Joining duty on : .!/./09./.2017

**Employee's Signature** 

COO/Admin/HR Manager



Page 1 of 2

	ANNU	AL/EMEF	RGENCY LEAVE APPL	ICATION F	ORM		
Section 1							= u
1. TO BE FILLED IN	BY THE EMPLO	VFF	E	mployee I	No: /3	Date: 23/0	8/2017
a. Name of Em			k Sanjeewa Pa	msana	4		
b. Designation		. 0	wantity Survey	NA.	<i></i>		
c, Department/	Location	- M	C.S. I. Salalah. A.	mort	***********		
d. Leave applie			5days (From .0.5./	199/201	7to09		*********
e. Reason for le	ave			Both days		, ,	
f. Ticket booking			Family bould to	1.414	FYPER LA	4600.B.O.YERK	Gament
	.g .oquout	*******		se attach F	light Bookir	ng Request)	*********
g. Transport to/	from Airport	: Airp	ort Drop- Yes. No		Pickup -		
h. Address duri	ng leave	:No.	25/2 Gampaha	Rd Yo	kkala.	.Sm. Lonke	
i. Telephone No	o, during leave	:	74.77.707.6020			************	
j. Leave to be		: Utili:	zed 🗾 E	n-cashed			
k. Date of joining	g (Initial)	:. Ap	mi/ 2007				
<ul> <li>Date duty res</li> </ul>	umed after last lea	ave : .20	107/00017				
	ed for Departure		1.03/2017				
Signature of Emp	Noyee	Office	r in Charge	Dir	ector of Op	erations	
			r In Charge	Dir	ector of Op	Annual Leave	
. <u>TO BE FILLED IN E</u>	BY THE PERSON	NEL DEP	r In Charge		ector of Op		Days
Passport valid till	15.08.202	NEL DEP	r In Charge			Month/ Year  1, 2.	Days
Passport valid till Resident's Card Nisa valid till	BY THE PERSON	NEL DEP	ARTMENT  f. No of days leave du	e Annuat	ector of Op	Month/ Year 1. 2. 3. 4.	Days
. TO BE FILLED IN B Passport valid till Resident's Card	15.08.202	NEL DEP	ARTMENT  f. No of days leave du  Earned L.  Balance leave	e Annuat ieu Leave	11.45	Month/ Year  1. 2. 3. 4. 5.	Days
Passport valid till Resident's Card Nisa valid till Leave due date	15.08.202	NEL DEP	F. No of days leave du  Earned L.  Balance leave (As of 31.0).2017)	e Annuat ieu Leave e Brought Forward		Month/ Year  1, 2, 3, 4, 5, 6, 7,	Days
Passport valid till Resident's Card Avisa valid till Leave due date Other	15.08.202	NEL DEF	f. No of days leave du  Earned Li  Balance leave (As at 31.03.2017)  (Avail	e Annuat ieu Leave e Brought Forward ed leave)	11.45	Month/ Year  1. 2. 3. 4. 5. 6. 7. 8. 9.	Days
Passport valid till Resident's Card Nisa valid till Leave due date Other	15.08.202 28.02.21	NEL DEF	Fin Charge  PARTMENT  f. No of days leave du  Earned L.  Balance leave (As of 31.03.2017)  (Avail	e Annual ieu Leave e Brought Forward led leave)	36.55	Annual Leave  Month/ Year  1. 2. 3. 4. 5. 6. 7. 8. 9.	Days
Passport valid till Resident's Card Nisa valid till Leave due date Other Airline Ticket by	15.06.202 28.02.20 Employee Co	NEL DEF	f. No of days leave du  Earned Li  Balance leave (As at 31.03.2017)  (Avail	e Annual ieu Leave e Brought Forward led leave) le (days) e to Carry	11.45 - 36.55 (19) 29	Annual Leave  Month/ Year  1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11.	Days
Passport valid till Resident's Card Nisa valid till Leave due date Other Airline Ticket by	15.06.202 28.02.20 Employee Co	NEL DEF	Earned L. Balance leave (As at 31.03.2017)  Total leave availab  Retained leave	e Annuat ieu Leave e Brought Forward ed leave) le (days) e to Carry Forward	11.45 - 36.55 (19) 29	Annual Leave  Month/ Year  1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	Days
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Passport valid till Resident's Card Avisa valid till Leave due date Other Airline Ticket by  gnature of Administration	Employee Co	MEL DEP	Earned L. Balance leave (As at 31.03.20)7) (Avail  Total leave availab Retained leave Approved leave ached following - Last form ame & Signature of Calculate  ARTMENT pay, and	e Annual ieu Leave e Brought Forward led leave) le (days) e to Carry Forward ve (days) ms 10 & 13	11.45 	Month/ Year  1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15,  ys in service for period	x 0.0822)
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Passport valid till Resident's Card Nisa valid till Leave due date Other Airline Ticket by  Granture of Administrations Remarks:  TO BE FILLED IN Leave granted Encashment of lea	Employee Co	MEL DEP	Earned L. Balance leave (As at 31.03.20)7) (Avail  Total leave availab Retained leave Approved leave ached following - Last form ame & Signature of Calculate  ARTMENT pay, and	e Annual ieu Leave e Brought Forward led leave) le (days) e to Carry Forward ve (days) ms 10 & 13	11.45 	Month/ Year  1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15,  ys in service for period	x 0.0822)

#### Section 2

The Personnel Department, Milcris Pvt. Ltd. (Oman) P.O. Box 1398. P.C. 130, Al Azaiba, Sultanate of Oman.

I wish to declare and confirm that I have attended to the following personal obligations in the manners indicated below and will therefore not cause any inconvenience to the Company during the period of my leave.

	paid in advance	arranged for payment
Rent for my residence	2011 A 100 May	N:/
Telephone and ADSL bills		Nil
Electricity		N/
Water bills		N;/

I further declare that the following have been handed over to the Procurement Officer of the Company as per the Company procedure.

	Procurement Officer
Motor vehicle parked at	Scholch Airport Office
Motor Vehicle Key	With me
Telephone	N:/
Telephone sim card	N:I

I further confirm and declare that I have also made arrangements/paid in advance my personal loan repayment installments and payments due to the credit card companies for the period of leave.

Signature of Employee:

Date: 23/08/2017

Name of Employee: K.K. Sanjeewa Prasange

Resident Card No: 73 75 24 29



## LEAVE REQUEST FORM FOR MIDDLE EAST EMPLOYEES

- Please provide as much time as possible when requesting leave
- Approval much be sought prior to taking leave or making any arrangements for leave
- Annual leave is based on calendar days and explained in your employment contract
- Please ensure you read the guidelines on the leave process

#### Employee Details

Employee Name: Sanjeeun Prosonga Designation. Quantity Surveyor Start Date with Hill: 01/01/2013
Employee No: 9/3 (Milkris) Project: MC5 Office: Scholah
Leave Requested Annual Sick Unpaid Bereavement Visa Run Other
First Workday / date on leave: 05 /09 / 2017 Lest workday / date on leave: 09 / 09 / 2017
Date returning to work: 10/09/2017 Contact details whilst on leave: +94 77 707 60 20
EMPLOYEE'S SIGNATURE DATE: 23/08/2017
Leave Details
Number of leave days accrued at the start of leave: Comments:
Number of leave days requested:
Remaining Balance:
Management Approval
Approved: Wes No Cal
MANAGER'S SIGNATURE: HR SIGNATURE:
(As necessary) VP / SVP APPROVAL SIGNATURE:
DATE:

#### NOTES TO COMPLETE THIS FORM

- Applicants should fill out all relevant sections, gain approval from their Supervisor and forward a copy HR
   If <u>sick leave</u> exceeds two working days, a medical certificate should be obtained and attached to this form
   Request for <u>Bereavement leave</u> must be accompanied by a letter / email stating the details, along with Supervisor approval
   <u>Unpaid leave</u> should only be submitted in exceptional circumstances, having gained Supervisor, VP / SVP & HR approval with a letter / email explaining the reasons. Please note contractual benefits cease during period of unpaid leave.

Leave Entitlement as at

04.09.2017

Name

K K Sanjeewa Prasanga

Emp No.

13

Date Joined

25-Apr-07

Rejoining date

24.08.2016

No.	Month	Days per Month	AL/LL	SL	EL	NPL	Other	Days worked	Earned Leave
Lea	eve balance B/F as a	t 31.03.2016							23.44
	2016								
1	April	30						30	2,70
2	May	31		= .				31	2.79
3	June	30		3				27	2.43
4	July	31	17					14	1.26
5	August	31						31	2.79
6	September	30						30	2.70
7	October	31						31	2.79
8	November	30						30	2.70
9	December	31				T =		31	2.57
	2017						T		_
10	January	31						31	2.57
11	February	28				-		28	2.32
12	March	31						31	2.57
13	April	30						30	2.49
14	May	31						31	2.57
15	June	30						30	2.49
16	July	31	19					12	1.00
17	August	31						31	2.57
18	September	4						4	0.33
Total	*************	522.00	36.00	3.00	-	740	- 4	483.00	65.10
l occ	:- Annual leave &	local leave							
	Annual Leave-AL	local leave							36.00
2	Local Leave-LL								30.00
Total I	Earned Leave balan	ce	*****************	****************	•••••				29.10
Othe	r Leave								
1	Sick Leave-SL		3						
	Emergency Leave-E	L	-						
	No pay Leave-NPL		-						
	Other	1							
	other leave		3						

Prepared By

Checked by

MALLERIS\*
Retationships Beyond Measure

# RECOMMENCEMENT OF DUTY REPORT

To : Chief Operations Officer

Date : 20/07/2017

## DUTY REPORT - RETURN FROM LEAVE

Name of Employee: K.K. Sanjeeua Prasanga

Emp. Code No. : 0/3

Department : .Q.S.

Place of Work : MC5 - Salalah

Leave taken : From: 02/07/2017.... To: 19/07/2017

Joining duty on : 20/07/2017

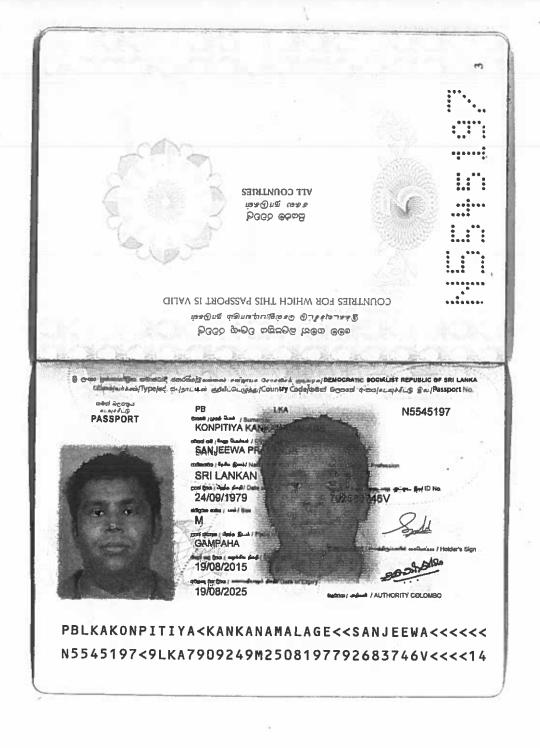
Employee's Signature

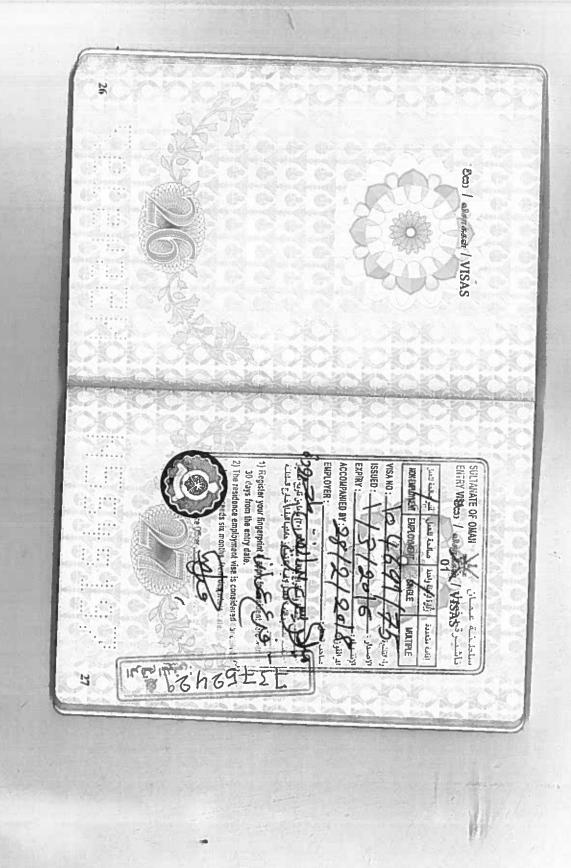
Chief operations Officer

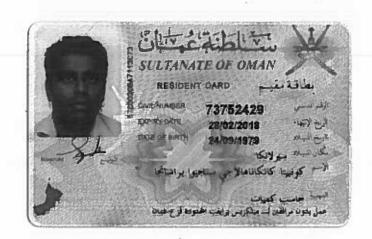
# FILE COPY



_		AN	NUAL/EME	RGENCY LEAVE A	PPLICATION I	FORM		
Sect	ion 1						1	
1 TC	BE FILLED IN E	OV THE END	OVEE		Employee	No:	Date:	
	. Name of Empl			V Canipara	Ducas			
- 1	The second second	loyee		. K Sanjeewa	Prosay	30		**********
b		a 100 5, 100		wantity sur	veyor	*************	***************************************	
C				C5 - Salalah				
d	Leave applied	for	:(	8days (From			(97/2917)	
e	. Reason for lea	IVB	·A	nnual leave	(Both days			
f.			. A	tto ched				
	Tiener booking	request			lease attach F	light Bookin	na Request)	
g	Transport to/fre	om Airport	: Air	port Drop- Yes No		Pickup -		
h	Address during	gleave		25/2 Gampah		kala - s	TO LANKA	
i.	Telephone No.		: 00	94 33 22 24 30	4 10094	77 707 4	020	*********
į.	Leave to be	d ver all tolerar		ized 🗸	En-cashed		7.49	
k.	Date of joining	(Initial)		pril 2007				
L	S ANTHONY OF STREET	A COLUMN TO SERVICE AND ADDRESS OF THE PARTY	t leave : 2	7/07/2016	***************************************			
m	Date scheduled			5/06/2017				
S	ignature of Emplo	05/2017 0yee	Office	er In Charge		rector of the	eratione	
	ignature of Emplo	руве		er In Charge	Di	rector of op	Annual Leave	
2. <u>TO</u>	BE FILLED IN B	Y THE PERS	ONNEL DE			rector of op	Annual Leave Month/ Year	Days
2. <u>TO</u>	BE FILLED IN B	Y THE PERS	ONNEL DE	PARTMENT			Month/ Year  1. 2.	Days
2. <u>TO</u>	BE FILLED IN B	Y THE PERS	ONNEL DE	f. No of days leave	e due Annual	rector of op	Month/ Year 1. 2. 3.	Days
2. <u>TO</u> 3. F	BE FILLED IN B' Passport valid till Resident's Card	Y THE PERS	ONNEL DE	f. No of days leave	e due Annual ed Lieu Leave	37.84	Month/ Year 1. 2. 3. 4. 5.	Days
2. <u>TO</u> 2. F	BE FILLED IN BY Passport valid till Resident's Card Visa valid till	Y THE PERS	ONNEL DE	f. No of days leave	Annual  Add Lieu Leave  eave Brought  Forward		Month/ Year 1. 2. 3. 4. 5. 6.	\\\\
2. <u>TO</u> 2. <u>F</u> 2. <u>L</u> 3. F	BE FILLED IN B' Passport valid till Resident's Card Visa valid till Leave due date	Y THE PERS	2025 - 2018	f. No of days leave	Annual ed Lieu Leave eave Brought	37.84	Month/ Year 1. 2. 3. 4. 5. 6.	\\\\
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2. <u>TO</u> a. F  b. F  c. L	BE FILLED IN BY Passport valid till Resident's Card Visa valid till Leave due date Other	19.08.1 28.02	2025 - 2018	f. No of days leave  Earne  Balance I  (AL 1291 31-D3 (//	Annual  ed Lieu Leave leave Brought Forward Availed leave)  illable (days)	37.84 - 23.44 (17) 44.28	Month/ Year  1. 2. 3. 4. 5. 6. 7. 8. 9. 10. D. 11.	\\\\
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2. TO  a. F  b. F  c. L  d. C  d. A  signatur  Rema  3. TO  a. Le  c. En	BE FILLED IN B  BE FILLED IN B  Passport valid till  Resident's Card  Visa valid till  Leave due date  Other  Virline Ticket by  Ure of Administrat  Urks:  BE FILLED IN B  Tave granted  Incashment of leave	Y THE PERS  19.08.3  28.02.  Employee	Company  A  OUNTS DEI days wi	FARTMENT  I. No of days leave  Earne  Balance I  (AC 1291 31-D3 (//  Total leave ava  Retained II  Approved  Approved  Attached following -: Last  PARTMENT th pay, and In pay, and In pay, Encas	Annual Annual ed Lieu Leave eave Brought Forward Availed leave) illable (days) eave to Carry Forward leave (days) t forms 10 & 13 culating Officer	37.84 - 23.44 (17) 44.28 18 26.28	Month/ Year  1. 2. 3. 4. 5. 6. 7. 8. 9. 10. D. 11. 12. 13. 14. 15.  ys in service for period  PACCOUNTS  ACCOUNTS  A	







KONDITIYA<KANKANAMALAGE<SANJEE 7909249M1802289LKA<<<<<8 >>>>>>>>>>

NATIONALTY SRI LANKAN



AWAELINAS BALMAMAMAMA SE SAULEEAN

NG OF CIVIL STATUS אסגעד סאניוא אטרוכצ

تامير المارية على المارية ع تعارضة

PERIOTE DAVING LICENCE