

**LEAVE APPLICATION FORM****EMPLOYEE DETAILS**

**EMPLOYEE NAME** : Kotakonda Balaraju  
**POSITION** : Full Stack Developer Trainee  
**DEPARTMENT** : IT Department  
**REQUEST DATE** : January 17 and 18.

**LEAVE APPLICATION**


**FROM** : January 17  
**TO** : January 18  
**NO OF DAY(S)** : 2  
**REASON** : Main Festival of Family

**LEAVE TYPE**

Please mark 'X' at the box provided.

MEDICAL LEAVE (ML)	<input type="checkbox"/>	ANNUAL LEAVE (AL)	<input type="checkbox"/>	UNPAID LEAVE (UL)	<input checked="" type="checkbox"/>
MATERNITY LEAVE	<input type="checkbox"/>	PATERNITY LEAVE	<input type="checkbox"/>	COMPASSIONATE LEAVE	<input type="checkbox"/>
HOSPITALIZATION LEAVE	<input type="checkbox"/>	EMERGENCY LEAVE (EL) (set off from AL)	<input type="checkbox"/>	OTHERS	<input type="checkbox"/>

**APPROVAL**

EMPLOYEE	HEAD OF DEPARTMENT (HOD)			CHIEF EXECUTIVE OFFICER (CEO)		
	Approved	<input type="checkbox"/>	<input type="checkbox"/>	Approved	<input type="checkbox"/>	<input type="checkbox"/>
	Rejected	<input type="checkbox"/>	<input type="checkbox"/>	Rejected	<input type="checkbox"/>	<input type="checkbox"/>
						
Date: 10 <sup>th</sup> Jan, 2023	Date:			Date:		

**FOR OFFICE USE ONLY****LEAVE ENTITLEMENT**

TYPES OF LEAVE	ML	AL	UL	OTHERS:
ENTITLEMENT				
TAKEN				
THIS APPLICATION				
TOTAL TO DATE				