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we are here

THE FEE IS STILL TO COME

3784 Independence Avenue • Red Cross Building • Katutura • Red Cross Building • www.gmobility.co.na • info@gmobility.co.na • CC/2010/4235

Employee Leave Request Form

Employee Name _____

Date _____

Supervisor Name _____

REASON FOR LEAVE

Vacation Leave of Absence Sick - Family

Sick - Self Dr. Appointment

Sick Family _____

Funeral For _____

Other _____

LEAVE REQUESTED

From _____ To _____

Number of Hours _____ Number of Days _____

Employee Signature _____ Date _____

Supervisor Signature _____ Date _____

Comment(s) _____