

FUTURA SA ADMINISTRATORS LEAVE APPLICATION FORM



EMPLOYEE DETAILS	
NAME & SURNAME	Courtney Sampson
APPLICATION DATE	23 October 2025
OFFICE	

SECTION A: Annual Leave					
FROM DATE	23 October 2025	TO DATE	23 October 2025	DAYS	
FROM DATE		TO DATE		DAYS	
FROM DATE		TO DATE		DAYS	
FROM DATE		TO DATE		DAYS	

SECTION B: Sick Leave					
FROM DATE		TO DATE		DAYS	
Medical certificate if absent from work 2 days or more?				<input type="checkbox"/> YES	<input type="checkbox"/> NO

SECTION C: Other Leave					
<input type="checkbox"/> STUDY LEAVE <input type="checkbox"/> TRAINING LEAVE <input type="checkbox"/> FAMILY RESPONSIBILITY LEAVE <input type="checkbox"/> OTHER					
FROM DATE		TO DATE		DAYS	
FROM DATE		TO DATE		DAYS	
FROM DATE		TO DATE		DAYS	
FROM DATE		TO DATE		DAYS	
Please give details of study, training, family responsibility or other leave:					

SECTION D: Authorisation			
EMPLOYEE SIGNATURE		MANAGER SIGNATURE	