

## LEAVE APPLICATION FORM

(Attach Documentary Evidence Where Applicable)

Name: Asha Jayaram Department: Administration

Position: HR Admin Leave Required: Medical

Reason: Testing....

19-07-2016 Date of Application

\* Application must be submitted not less than 2 working days before the proposed date of commencement of leave. One week notice is required for leave application of more than 3 days.

While I am Away, My Job is being covered by: Izzudin

I can be contacted At Tel No: 1234561234

## **Leave Details**

Period : Full Day Balance Leave : 16.0

Dates Applied: 15-07-2016,14-07-2016

Name of Applicant: *Asha Jayaram* Department / Branch: *Administration* This is to inform you that your leaves mentioned above is *Approved*. Your balnace leave as at 2016 is 16.00 days.

HR Dept 19-07-2016

<sup>\*</sup> System generated document and requires no signature.