**OFFICE LEAVE APPLICATION**

Date:

|  |
| --- |
| In Case of sick leave:  Comment: …………………………………… ……………………………………………….. ……………………………………………….. ……………………………………………….. ………………………………………………..  …………………………  Signature of  Company Medical Officer |

To

The Manager (HR & Admin)

Dhaka CentreNIC IT Limited

House# 34,(8th Floor)Road# Sonargaon Janopath

Sector# 11, Uttara, Dhaka-1230

Sir,

I Need 3 day/Days casual/sick/earned/Maternity/ Leave on marriage ceremony From …………………………to

…………………………. On of account ……………………………………………………………………………

………………………………………………………………………………………………………………………..

……………………………………………………………………………………………………………………… .

Leave address: Signature of the Applicant

Vill: ………………….. . P.O: ………………. Name:

P.S: …………………………………………... Designation:

Dist: ………………………………………….. Job ID No:

Phone: ……………………………………….. Dept:

Date of Appoinment:

…………………………. …………………………… ……………………..

Signature of Dpet. Head Head of HRD Director