



Leave Application Form

Name : Bayu Bagus Bagaswara
Portfolio : PT Bank Danamon Indonesia
Department : IT

☐ Annual ☒ Medical ☐ Others ☐ Replacement
☐ Emergency / Compassionate

Reason(s)

Sick leave

From : 02 / 12 / 2024 To : 02 / 12 / 2024 Day(s) : 1

Signature : _____

Date : ____/____/____ Time : ____:____ AM / PM

In case of any work related urgency, I am contactable at : _____

Note :

To allow a timely processing of your leaves & to avoid any unforeseen delays,

You are required to submit ANNUAL leave(s) application to HR department atleast 3 days in advance.

For Official Use Only

Recommendation(s) by Manager / HoD : ☐ Approved ☐ Not Approved

Approved By Human Resource

Signature : _____

Date : ____/____/____

Time : ____:____ AM / PM

Approved By Director - IT Services

Signature : _____

Date : ____/____/____

Time : ____:____ AM / PM

Annual :	<input type="checkbox"/> Entitlement	<input type="checkbox"/> Taken	<input type="checkbox"/> Balance
Medical :	<input type="checkbox"/> Entitlement	<input type="checkbox"/> Taken	<input type="checkbox"/> Balance
Others :	<input type="checkbox"/> Entitlement	<input type="checkbox"/> Taken	<input type="checkbox"/> Balance
Emergency / Compassion :	<input type="checkbox"/> Entitlement	<input type="checkbox"/> Taken	<input type="checkbox"/> Balance
Replacement :	<input type="checkbox"/> Entitlement	<input type="checkbox"/> Taken	<input type="checkbox"/> Balance

Remarks :