

APPLICATION FOR LEAVE OF ABSENCE

Please fill-out completely and accurately and attach the necessary documents. Failure to do so may cause the application. Date: July 02, 2024 Department / Team: Technologies Unit

to be disapproved.			Job Position:				
to be alcappioved.			Web App Developer				
Name:							
Anton Jay I	L. Herm	10					
Employment Status	Type of Leave			Period Covered			
Probationary		○ Vacation Leave		Start of Leave: 2024-07-01 End of Leave: 2024-07-01			
		Sick Leave			No. of days:		
		O uncra		110. or days.			
Team Lead must inform employee immediately if the leave is approved or disapproved							
Reason(s):							
Fever							
	Familia va d'a Ciarra de una						
			Employee's Signature				
Recommendation							
○ Approved w / pay							
Approved w/o pay					Managing Di	roctor	
 Disapproved 		Team Lead (Signature)		Managing Director (Signature)			
Remarks				(5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			
Disapproved means without pay and can be a violation to company policy							
	Vacation Leave		Sick Leave		Others		
Total leave		alion Leave	SICK LEAV	V C	Oli	1019	
Less this leave							
New leave balance							
Remarks							
T							
To be filled up by Business Support Associate / People Operations Officer							
	O#:	(0:					

People Operations Officer (Signature)	Business Support Associate (Signature)
1 copie operations officer (dignature)	Business Support / (Seciate (Signature)