

## **Leave Request Form**

Employee Info:			11.2		
Name	Muhammal	Pn 2 Employe	e No.	4776	
Department	Civil	Position	Title Yai	nter	
Joining Date		Location		lsegur-03	
			N.C.		
	A CHARLES A BURN TO THE	Requestor Field			
Type of Leave:  Annual Leave		ck Leave	I 🗆 5		
Unpaid Leave		1arriage Leave		amination Leave ijj Leave	
Bereavement		ew Birth Leave		rnity Leave	
	***				
Leave Dura (by days		Day End	d Day Re	sumption of Duty	
		12 12 /	725	13/12025	
1d0	ry/ 12/7	123 121	ハンラ	13/1/209	
Destination & A	ddress				
Contact during l					
Further Remark	:s:				
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1 am	going to	W/19	2)		
		HR Field			
Balance		Entitlemen	WALTER THE STREET STREET		
Last Vacation	Company	Approved I			
Tickets & Visa	Employee	Contract Ty	pe L	Single  Family	
HR Remarks					
Cianoturos					
Signatures: Requestor	Alternative Emp.	Direct Manager	HR Departme	nt HR Manager	
Mediceston	ID:	Direct Wallagel	TIN Departifier	Till Manager	
1 200	Name & Signature:	1 W			
and a		#			
"		d soul			
Date:	Date:	Date: 1707	~Date:	Date:	

**HR** Department

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