

## **Leave Request Form**

Employee Info:					
Name	Sagruik	Ali	Employee No.	2803	
Department	Civil		<b>Position Title</b>	Printer	
Joining Date		- modes	Location	Paintes Red Sea- Ho	02/
200134033			AND THE STATE OF	710000000000000000000000000000000000000	
V 7 . 4 . 54 . 15	9/6	Request	or Field	<b>在社会基础,由他是建</b>	
Type of Leave:					
Annual Leave Sick Leave		Sick Leave		Examination Leave	
Unpaid Leave		☐ Marriage Le	ave	Hajj Leave	
☐ Bereavement Leave		New Birth Leave		Maternity Leave	
Leave Dura (by days		Start Day	End Day	Resumption of D	uty
Day		28/06/25	28/6/2	29/6/25	5
		2.1	100		وأحور
Destination & A	ddress				
Contact during I	Leave				
Further Remark	s:				
Going	to un	msah			
		UP	Field		
Releves		اللها	Entitlement		
Balance Last Vacation			Approved Days	T-100	
		mpany 🔲		D D	1
Tickets & Visa	Employ		Contract Type	☐ Single ☐ Famil	У
HR Remarks					

Signatures:

Requestor	Alternative Emp.	Direct Manager	HR Department	HR Manager
	ID:	42		
	Name & Signature:			
را فعل	-	3/		
Date:	Date:	Date:	Date:	Date:

