

Leave Request Form

Employee Info:

| | | | |
|--------------|----------------|----------------|-----------------------|
| Name | Murad Ali Shah | Employee No. | 3782 |
| Department | Civil | Position Title | Scaffolding Inspector |
| Joining Date | | Location | Red Sea HC03 |

Requestor Field

Type of Leave:

| | | |
|--|--|--|
| <input type="checkbox"/> Annual Leave | <input type="checkbox"/> Sick Leave | <input type="checkbox"/> Examination Leave |
| <input type="checkbox"/> Unpaid Leave | <input type="checkbox"/> Marriage Leave | <input type="checkbox"/> Hajj Leave |
| <input type="checkbox"/> Bereavement Leave | <input type="checkbox"/> New Birth Leave | <input type="checkbox"/> Maternity Leave |

| Leave Duration (by days) | Start Day | End Day | Resumption of Duty |
|--------------------------|------------|------------|--------------------|
| One day | 21/05/2025 | 21/05/2025 | 22/05/2025 |

| | |
|-----------------------|--------|
| Destination & Address | Jeddah |
| Contact during Leave | |

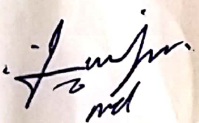
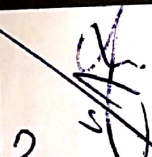
Further Remarks:

| |
|--------------------------|
| Going to renew passport. |
|--------------------------|

HR Field

| | | | |
|----------------|--|---------------|---|
| Balance | | Entitlement | |
| Last Vacation | | Approved Days | |
| Tickets & Visa | <input type="checkbox"/> Company <input type="checkbox"/> Employee | Contract Type | <input type="checkbox"/> Single <input type="checkbox"/> Family |
| HR Remarks | | | |

Signatures:

| Requestor | Alternative Emp. | Direct Manager | HR Department | HR Manager |
|---|-------------------|--|---------------|------------|
|  Date: 21-05-2025 | ID: |  30-5-2025 | | |
| | Name & Signature: | | | |