

Leave Request Form

Employee Info:

Name	Jabed Khan	Employee No.	3147
Department	Civil	Position Title	Gypsum Installer
Joining Date		Location	Red Sea HC-02

Requestor Field

Type of Leave:

<input type="checkbox"/> Annual Leave	<input type="checkbox"/> Sick Leave	<input type="checkbox"/> Examination Leave
<input checked="" 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
1 day	23/6/2025	23/6/2025	24/6/2025

Destination & Address	
Contact during Leave	

Further Remarks:

My wife met an Accident, he is in ICU.
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HR Field

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

Signatures:

Requestor	Alternative Emp.	Direct Manager	HR Department	HR Manager
	ID:			
	Name & Signature:			
Date:	Date:	Date:	Date:	Date: