

HYBrain Request for Leave

The survey will take approximately 4 minutes to complete.

1. Employee Name *

Ryan Garde

2. Leave Category *

- ☐ Paid Leave
- ☐ Unpaid Leave
- ☒ Sick Leave
- ☐ CTO
- ☐ Maternity/Paternity Leave

☐ Other

3. Reason for Leave *

- ☐ Vacation/Personal Leave
- ☐ Ill Family Member (specify relationship in **Notes**)
- ☐ Care for New Child
- ☒ Sick

4. Beginning Date of Leave *

10/5/2022 

5. Start of Leave Type *

- ☒ Entire Day Leave
- ☐ Half-Day AM Leave
- ☐ Half-Day PM Leave

6. Ending Date of Leave *

10/5/2022



7. End of Leave Type *

- ☒ Entire Day Leave
- ☐ Half-Day AM Leave
- ☐ Half-Day PM Leave

8. Address During Leave *

La Carlota City

9. Phone Number During Leave *

09693133367

10. Special Circumstances & Other Notes (specify **None** if no further notes) *

None

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