

EMPLOYEE REQUEST FORM

QMS-HRFO-031

Dona Care Se		Date: 04/07/2025		
Employee Name :	Chammi Buddhika Kariya	wasam Siththarage	Employee No. :	DCS-350
	Registered General Nurse		QID No. :	2 <u>8014417597</u>
	19/06/2024		Department :	Nursing
TYPE OF REQUEST				
✓ Leave Encashment	☐ Ticket Encashment	QID Application / Rene	ewal	Promotion
Health Card Renewal	Exit Permit	NOC Letter		Personal Loan
Employment Certificate	Employment Contract Copy	Salary Increment		Other
DUDDOSE and as DEASON/S FOR DEGUEST				
PURPOSE and or REASON/S FOR REQUEST				
Requested by (Name &	signature):			
(Note : To be filled up only if requesting for Personal Loan)				
Amount Applied (In Qat				
Number of Installment (For Payment):			
First Installment Due On	:			
TO BE FILLED	UP AND SIGN BY THE LO	AN GUARANTOR IF T	HE PURPOSE I	S PERSONAL LOAN
for the loan applied by Mr	bearin	g QID No,		e to undertake as the guarantor
for the loan applied by Mr./Ms I am aware and guarantee that as the Guarantor for the loan obtained by Mr./Ms I will bear all the liabilities to pay it back in the following conditions:				
1. His/Her inability to settl	e the loan amount due to financia	l difficulties.		-
	any without following proper proc undertake to pay back all due amo		in accordance with t	he ahove-mentioned
conditions.	andertake to pay back all due amo	ount to pond care services i	iii accordance with t	ne above-mentioned
-				
Loan Guarantor Name & Signature:				
APPROVALS (To be fill up by Management)				
HR Remarks:				
APPROVED	REJECTED	OTHERS (please speci	ify)	
FINANCE Remarks:				
APPROVED	REJECTED	OTHERS (please specif	fy)	
Department	. :			
Manager/Supervisor/ Head	<u></u>			Date:
	(Na	ame and Signature)		
Accounts Department	•			Date:
recounts Department	· 	Signature	·	Dutt.
		5.5		
Asif Lateef	:		:	Date:
HR Manager		Signature		
KHALID HABASH AL-SUV	VAIDI			
Chief Executive Officer	:		:	Date:
		Signature		

QMS-HRFO-031 HR Service Request Form