



LEAVE RELIEVER FORM

Kindly fill the details below and have your reliever(s) sign where indicated

Date of Application: 05TH JUNE 2024.

Leave Type: ANNUAL.

Reliever 1: MAGDALENE MBOTA.

Signature: .

Date: 05TH JUNE 2024.

Reliever 2: _____.

Signature: _____.

Date: _____.

Reliever 3: _____.

Signature: _____.

Date: _____.

NAME: **Nancy Adongo**

Requesting for **1(one) day** annual leave as from **Friday 7th June 2024**