

LEAVE APPLICATION FORM

APPLICATION NO: LVAP-00001

PART 1		EMPLOYEE DETAILS
EMPLOYEE NO		NCIA00002
EMPLOYEE NAME		Millicent Musanga Shitakha
JOB TITLE		MGR. BUSINESS DEVELOPMENT
PHONE NO		
EMPLOYEE NO		NCIA00009
EMPLOYEE NAME		Anne Njeri Kago
JOB TITLE		SR. SUPPLY CHAIN MGT OFFICER
PHONE NO		

PART 2		LEAVE DETAILS
LEAVE TYPE		ANNUAL
LEAVE DAYS APPROVED		3
LEAVE START DATE		09/25/2024
LEAVE END DATE		09/27/2024
LEAVE TYPE		ANNUAL
LEAVE DAYS APPROVED		4
LEAVE START DATE		10/04/2024
LEAVE END DATE		10/09/2024

<u>APPROVALS</u>		
Approval Title	Approved Date	Signature
GRACE	10/02/2024	
JOSHUA	10/02/2024	