



LEAVE REQUEST FORM

Name : Putu Aprilia Candra Dewi Length of Leave : 3 Days
Position : Event & Marketing Coor Starting Date : 16 th October 24
Department : EVENT & MARKETING Ending Date : 18 th October 24
Kind Of Leave : Ceremony Working Date : 21 st October 24

- ☐ Annual
☒ Day Off Payment
☐ Extra Off
☐ Other _____

	Entitlement	Request	Balance	Remarks
Annual				
Day Off Payment	<u>18</u>	<u>3</u>	<u>15</u>	
Extra Off				
Other Leave				

Reason for Request : Ceremony

Contact Number and Address during leave : 082145780992 and Jalan Setra Agung II
Gang III Tuban.

Department Head Recommendation : Citra Keswari Dewi

Particular Action : _____

Requested by:
Employee

Date : 14 th October 24.

Approved by,

Department Head

14 th Oct 24

HR Manager / Director

CC. - HR Department

- Department Concerned