ZIMBABWE ELECTRICITY SUPPLY AUTHORITY

APPLICATION FOR LEAVE

is form must be completed in quad	druplicate CORRECTLY and in BLOCK LETTERS)
ME and INITIALS (Mr. Mrs. Miss)	E.C. No
gnation	E.C. NO.
artment/Station	
E OF LEAVE REQUIRED. TIC	K IN THE APPROPRIATE BOX
Vacation	(b) Urgent Pvt. Affairs (c) Unpaid Leave
Sick Leave	(e) Maternity Leave
1	To
YOU REQUIRE ENCASHMENT OF	LEAVE?Number of days
4	20 Signature
arks:	
mmendød	ApprovedArea Manager
Head of Section	Head of Department / P.S. Manager
	and the control of th
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. • • •	Section 24 (1) of Leave Regulati
	THE DESCRIPTION OF THE PROPERTY OF THE PROPERT
ZIMBA	ABWE ELECTRICITY SUPPLY AUTHORITY
	APPLICATION FOR LEAVE
(This form must be completed in	n quadruplicate CORRECTLY and in BLOCK LETTERS)
	fiss)E.C. No
NAME and INITIALS (MI. MIS. M.	2155 }
Designation	
Department/Station	TICK IN THE APPROPRIATE BOX
CHANGE OF A PARTY DESCRIPTION	THE REPORT OF METEROLETICATE DAMA
TYPE OF LEAVE REQUIRED.	
(a) Vacation	(b) Urgent Pvt. Affairs (c) Unpaid Leave
(a) Vacation (d) Sick Leave	(b) Urgent Pvt. Affairs (c) Unpaid Leave (e) Maternity Leave
(a) Vacation (d) Sick Leave From	(b) Urgent Pvt. Affairs (c) Unpaid Leave (e) Maternity Leave No. of Working days
(a) Vacation (d) Sick Leave From	(b) Urgent Pvt. Affairs (c) Unpaid Leave

ApprovedArea Manager