

## **LOCAL LEAVE**

DISTRIBUTIONS: Original to Officer

Copies to: Permanent Secretary Provincial Permanent Secretary/  
Head of

Department

### **ZAMBIA TEACHING SERVICE (LOCAL CONDITIONS)**

#### **APPLICATION FOR LEAVE (OTHER THAN SICK LEAVE) FOR A**

(Officer in Division 1, II, III)

#### **PERIOD OF LESS THAN THIRTY DAYS**

To be completed and forwarded in TRIPLICATE to the Permanent Secretary or Head of Department as early as possible before the proposed date of departure.

#### **PART I**

(To be completed by applicant)

Name:..... Ministry File Number.....

Appointment:..... Station:.....

Ministry:.....

Date of Commencement of present period of qualifying Service:.....

20.....(a) Service in months since (a) above at date of.....

Proposed Leave:..... Division in which Serving.....

Rate of leave days a month leave granted since (a)

above days.

Leave applied for:..... the first of which is to be:.....20.....

Duty to be resumed on:.....20.....

Address during leave:.....  
.....  
.....

Date:.....

Signature of applicant

## **PART II**

(To be completed by Permanent Secretary or Head of Department) Leave approved:  
Days

SIGNATURE:..... Date:.....

Designation:.....