

Sopra Steria Asia Pte. Ltd.

MC/HL Notification Form

| Name: Employee Number: |
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| Date of Notification : |
| Number of Days : |
| From : |
| To : |
| Remarks: |
| Staff Signature : |
| Approved by(PM) & Date: |
| Date Received by HR : |
| |
| PLEASE ATTACH ORIGINAL MC/HL CERTIFICATE |
| PLEASE ATTACH ORIGINAL MC/HL CERTIFICATE HR Use Only: |
| |
| HR Use Only: |
| HR Use Only: Date of Employment |
| HR Use Only: Date of Employment Employee MC/HL till date |
| HR Use Only: Date of Employment Employee MC/HL till date |