



IOM International Organization for Migration  
OIM Organisation Internationale pour les Migrations  
OIM Organización Internacional para las Migraciones

## LEAVE REQUEST

		Prepare in <b>duplicate</b> : 1 copy will be returned by the Supervisor to the staff member, via the Time Keeper, to notify approval or disapproval of request.			<b>MR</b>
		1 copy to be forwarded to HRD.			
		For Sick leave with certificate please prepare in triplicate and send all 3 to Medical Services/OHU.			
Date:	02/12/2020	Address while absent:	<input type="checkbox"/> Approved	Comments:	Annual Leave
Staff member:	Lokiri james jackson DUKU	Gudele II Block 5	<input type="checkbox"/> Disapproved		
Staff member ID:	JBA-IOM-LS-00492				
Post of Duty:	Juba				
Dept./Div	Database Assistant	Staff member's signature	Supervisor's Signature		

I request leave of absence as follows:					
Leave Request	From	To		No of Days	
Sick Leave	02/12/2020	02/14/2020		2	



Annual Leave	02/15/2020	02/20/2020		5	

\* For Headquarters employees, officials at Headquarters and in the field a medical certificate must be sent immediately under confidential cover to the Medical Officer at Headquarters for any illness or accident.

- a) in excess of three (3) consecutive working days
- b) in excess of seven (7) days non-certified sick leave in any one calendar year
- c) occurring during annual leave when the staff member desires such a period to be charged to sick leave instead of annual leave.