Giorgio, ITS,8-Aug-99

Leave Request 2000 new .doc



## LEAVE REQUEST

Prepare in duplicate: 1 copy will be returned by the Supervisor to the staff member, via the Time Keeper, to notify approval or disapproval or request.

MR: NOA/SS10/JUB/0001/MAY/20

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:	05/21/2020	Address while absent:		Submitted	Comments:	5 days of Annual Leave
Staff member:	Lokiri james jackson DUKU	GUDELE II	$\checkmark$	Pending		
Staff member ID:	JBA-IOM-LS-00492					
Post of Duty:	Juba					
Dept./Div	Information Management Unit (IMU)					

I request leave of absence as follows:							
Leave Request	From	То	No of Days				
Annual Leave	05/21/2020	05/28/2020	7				

Cer	rtified to be within leave credit				
	Certified special approval has been grant in accordance with § B.v) of General Instruction N° 404.5				
Tim	ne Keeper's Signature:				
* M	edical certificate has been sent to:				
The	e Medical Officer, Headquarters				
The	e Chief of Mission				
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05/21/2020