Leave Request 2000 new .doc Giorgio, ITS,8-Aug-99



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 of request.

MR: NOA/SS10/JUB/0002/NOV/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:	11/30/2020		Address while absent:			Approved	roved		5 days of Annual Leave
Staff member:	ember: Lokiri james jackson DUKU		GUREI BLOCK 5			Submitted			
Staff member ID:					Pending				
Post of Duty:	st of Duty: Juba			V	Cancelled				
Dept./Div Information Management Un		ent Unit (IMU)							
							'		
			-f -h				Certified to b	e within lea	ave credit
		i request leave o	of absence as follows:						
Leave Request	From		То	No of Da		'S	Certified special approval has been grant in accordance with § B.v) of General Instruction N° 404.5		
							Time Keeper's Signature:		e:

Leave Request	From	То	No of Days		

Date:

11/30/2020

Certified special approval has been grant in accordance with § B.v) of General Instruction N° 404.5
Time Keeper's Signature:
* Medical certificate has been sent to:
The Medical Officer, Headquarters
The Chief of Mission
 * 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.

11/30/2020