

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/0001/SEP/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: | 09/21/2020 | Address while absent: | Submitted | Comments: | 5 days of Annual Leave |
|------------------|-----------------------------------|-----------------------|-----------|-----------|------------------------|
| Staff member: | Lokiri james jackson DUKU | GUDELE II | Pending | | |
| Staff member ID: | | | | | |
| Post of Duty: | Juba | | | | |
| Dept./Div | Information Management Unit (IMU) | | | | |
| I | | | | | |

| I request leave of absence as follows: | | | | | | | |
|--|------------|------------|------------|--|--|--|--|
| Leave Request | From | То | No of Days | | | | |
| Annual Leave | 09/23/2020 | 09/25/2020 | 2 | | | | |
| Sick Leave | 09/26/2020 | 09/30/2020 | 4 | | | | |
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| Cei | rtified to be within leave credit |
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| | rtified special approval has been grant in accordance with § B.v) of General truction N° 404.5 |
| Tim | ne Keeper's Signature: |
| * M | ledical certificate has been sent to: |
| The | e Medical Officer, Headquarters |
| The | e Chief of Mission |
| me | |



09/21/2020

Lokiri james jackson DUKU

Database Assistant