## 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: SS10/JUB/0003/FEB/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.

02/19/2020	Address while absent:	1	Approved	Comments:	Annual Leave
Lokiri james jackson DUKU	Test		Disapproved		
JBA-IOM-LS-00492					
Juba					
Information Management Unit (IMU)					
	Lokiri james jackson DUKU JBA-IOM-LS-00492 Juba	Lokiri james jackson DUKU  JBA-IOM-LS-00492  Juba	Lokiri james jackson DUKU  JBA-IOM-LS-00492  Juba	Lokiri james jackson DUKU  JBA-IOM-LS-00492  Juba  Test  Disapproved	Lokiri james jackson DUKU  JBA-IOM-LS-00492  Juba  Test  Disapproved  Juba

I request leave of absence as follows:						
Leave Request	From	То	No of Days			
Annual Leave	02/19/2020	02/21/2020	2			
Maternity Leave	02/28/2020	02/28/2020	0			

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



Lokiri james jackson DUKU

Database Assistant 02/19/2020



Steller makasi KAVUWA

**Information Management Coordinator** 

02/19/2020