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App. Date	
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LEAVE AD	DUCATION FORM

App. Date	

LEAVE APPLICATION FORM LEAVE APPLICATION FORM

) Personal Information				1) Personal Information							
Name			Employee No.	Name Employee No.							
					T		T				
Company Site	Department	Mobile No	Designation	Company	Site	Department	Mobile No	Designation			
?) Leave Type (please cl	heck the applicable	e box)		2) Leave Typ	e (please	check the applicable	box)				
Annual \square	Casual \square	No Po	ay 🗆 Paid 🗆	Annual 🗆 Casual 🗆 No Pay 🗆				Pay □ Paid □			
Half Day	If half day, please	specify: Mornin	ng \square Afternoon \square	Half Day \square If half day, please specify:				Morning \square Afternoon \square			
Lieu Leave 🗌	If Short Leave, pled	ase specify: Mornin	ig \square Afternoon \square	Lieu Leave		If Short Leave, plea	se specify: Morr	ning \square Afternoon \square			
3) Leave Date(s)				3) Leave Dat	e(s)						
From D D M M Y Y	to D M M Y Y	No	of Day(s)	From D D	M M Y Y	to D M M Y Y	N	No. of Day(s)			
		_									
,		. , , , ,	Signature	4) Reason 5) Acting Off		e 🗌 Sick 🗌 Other		Signature			
Applicant Signature		pproving Authority`s ature & Name	Date	Applicant S	ignature		proving Authority	y`s Date			
	HR C	Office Use Only				HR O	ffice Use Only				
eave Entitlement :	Annual	Days	Casual Days	Leave Entitle	ment :	Annual [Days	Casual Days			
.eave Taken: ncl. above)	Annual	Days	Casual Days	Leave Taken: (incl. above)		Annual [[Days	Casual Days			
eave balance:	Annual	Days	Casual Days	Leave balan	ce:	Annual [[Days	Casual Days			
No Pay 🔲 🗌 Days	Verified by: N	ame	Signature	No Pay] Days		ame	Signature			
• •	•		ted to the HR Department. isional Head or Supervisor (in his/her			•		nitted to the HR Department, Divisional Head or Supervisor (in his/h			

- absence the next in line.) Acting arrangements should be made in advance.Sick Leave should be supplemented with a recognized medical practitioners Medical report.
- Application for Maternity Leave must be submitted to HRD Division at least two months in advance.
- All leave must be taken with prior approval from the relevant Divisional Head or Supervisor (in his/he
 absence the next in line.) Acting arrangements should be made in advance.
- Sick Leave should be supplemented with a recognized medical practitioners Medical report.
- Application for Maternity Leave must be submitted to HRD Division at least two months in advance.