

EMPLOYEE LEAVE APPLICATION FORM

1.NAME OF EMPLOYEE: FRED KAIRU

ID NO:
PAYROLL NO: INTGR1297
JOINING DATE: 01-01-1970
BRANCH/DEPARTMENT:
2.No Of Days applied for From To
3.To report back on
4.Balance of leave days brought forward
This years entitlement21
Days remaining after this application1
Person to relieve the applicant while on leave
Name
Employee's Declaration
I hereby confirm that i have taken my annual leave and further agree that i have no claim against the company for any outstanding dues or days in lieu of my annual leave to (month)2019
Signature
(Date)04/02/2019
(Incase your services are required, you will be called back prior to completion of your leave)