

EMPLOYEE LEAVE APPLICATION FORM

1.NAME OF EMPLOYEE: FRED KAIRU

ID NO:

is no.
PAYROLL NO: INTGR1297
JOINING DATE: 01-01-1970
BRANCH/DEPARTMENT:
2.No Of Days applied forFromToTo
4.Balance of leave days brought forward
This years entitlement
Days remaining after this application0
VameJob Title
Applicant's contact address while on leave:
Felephone NoAlternative Phone No
Signature of applicant
Leave Reccommended/Rejected by:
NameSignature ∟eave Approved/Rejected by:
NameSignature
Employee's Declaration
hereby confirm that i have taken my annual leave and further agree that i have no claim against the compai for any outstanding dues or days in lieu of my annual leave to (month) (Year)
Date)
Incase your services are required,you will be called back prior to completion of your leave)

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