

APPLICATION FOR LEAVE

Name:

Ministry/Department:.....

Post:.....

Division:.....

Salary:..... p.a

Present Tour commenced:.....

I hereby apply for day(s) Annual/Maternity/Special (With/Without Pay/Casual Leave/
from to

Address whilst on Leave

.....
.....
.....

Phone No:..... Email address:.....

Reason(s) for leave:

.....
.....
.....

Signature:.....

Date:.....

For Official Use

Recommended by :.....

Date:.....

Approved by:.....

Date:.....

Head of Department

For Heads of Departments where Ministerial approval is required

Approved by:

Date:.....

Ministerial Head of Department