

# LEAVE APPLICATION FORM

Employees Name:	<input type="text"/>	Date of application:	<input type="text"/>
Location:	<input type="text"/>	First day of leave:	<input type="text"/>
Total number of days Taken:	<input type="text"/>	Last day of leave:	<input type="text"/>
Recommended by: (team leader/store manager)	<input type="text"/>	Authorised by: (Franchisee/director)	<input type="text"/>

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## LEAVE TYPE:

*(Please tick appropriate box)*

- Annual Leave
- Sick Leave
- Lieu day
- Bereavement Leave
- Study Leave
- Paternity Leave
- Special Leave
- Leave without pay

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## NOTE:

1. Annual leave, study or other required at least 4 weeks' notice.
2. Sick or bereavement leave required a medical certificate if absent or sick for more than one day.
3. Days in lieu may not be paid out, but must be taken as a lieu day as soon as possible after it is accrued.