

**T-STEP 00..llD**

LEAVE REQUISITION/RECORD ...

Date

Name Emp.code

Position Service

Started date

Leave Category : \* UNPAID LEAVE OF ABSENCE day [s]

* SICK LEAVE day [s]
* ANNUAL LEAVE 1 day [s]
* MATERNITY LEAVE day [s]
* PATERNITY LEAVE day [s]
* MARRIAGE LEAVE day [s]
* COMPASSIONATE LEAVE day [s]
* STUDY & EXAM. LEAVE day [s]
* PERSONAL LEAVE day [s]

From Will return to work on

Reason

To time

Requested by: \_ Approved by: \_

Authorized signature

*...............1...................1 ..\_*

Accumulated of leave record/excluded this time

ANNUAL LEAVE

**day ]s]** Balance

**day ]s] Checked by** : \_

PERSONAL LEAVE

**SICK** LEAVE **day ]s]** Balance **day ]s]**

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**day Js}** Balance **day ]s}**

Personnel Dept.

For Personnel Dept. only