

# Application for Vacation Leave

From Officers other than Heads of Department (To be prepared in triplicate). Top copy in blue



1. **To: Head of Department**

I apply to take    days from \_\_\_/\_\_\_/20\_\_\_ to \_\_\_/\_\_\_/20\_\_\_ both days

included as part of my vacation leave of which I have already taken    days during the current year.

**Employee Information**

Last Name	<input type="text"/>
First Name	<input type="text"/>
Middle Initial(s)	<input type="text"/> <input type="text"/> <input type="text"/> Employee ID Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Job Title	<input type="text"/>
Department	<input type="text"/>

Employee Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/20\_\_\_

(a) Leave request noted by Supervisor/Sub-Head

Signature of Supervisor/Subhead: \_\_\_\_\_ Date: \_\_\_/\_\_\_/20\_\_\_

2. **To: Permanent Secretary**

Leave recommended in accordance with vacation roster.  Yes  No

- Departmental arrangements will be made to cover for the period of leave.
- A substitute is required to cover, please see attached recommendation.

Head of Department \_\_\_\_\_ Date: \_\_\_/\_\_\_/20\_\_\_

3. **To: Head of Department/HR Contact Person**

Leave Approved in accordance with recommendation.  Yes  No

Permanent Secretary \_\_\_\_\_ Date: \_\_\_/\_\_\_/20\_\_\_

4. **To: Head of Department**

This Employee now has    days available.

- Leave is in order and recorded.
- Leave is not in order. Please amend as indicated.
- Action to satisfy the substitute requirement requested at section 2 will be taken.

\_\_\_\_\_/\_\_\_\_\_/20\_\_\_  
Deputy Director, Employment Date

For HRI System Use Only

Received Signed: \_\_\_\_\_ Date: \_\_\_/\_\_\_/20\_\_\_

Entered in System Signed: \_\_\_\_\_ Date: \_\_\_/\_\_\_/20\_\_\_