

Leave Form (Updated on 05.01.2021)

(In case of Online Filling, Press Ctrl + S to save the form & no need for the signature.)

Section 1- Application:-

Employee Name: Employee Code:

Designation: Department:

Contact No.: Date:

Type of Absence Requested:

Sick Leave (SL) Casual Leave (CL) Earned Leave (EL) Maternity Leave (ML)

Paternity Leave (PL) Compensatory Off Other

Dates of Leave: From: To:

Reason for Leave:

- You must submit request for absences, other than sick leave, ***three days prior to the first day you will be absent.***
- Put a signature & date below and then route it to HOD or Manager for approval.
- After filling, please send this form to Section 2.

Signature: Date:

Section 2- Senior's Approval (Senior/HOD/MD/JMD):-

Approved

Disapproved

Remark (if any):

Name: Signature: Date:

- If approved then route it to HR Department.
- If disapproved then route it back to the originator.
- Please forward this form to Section 3.

Section 3- HR Department:-

- Check if sufficient leaves are available and then execute the further process, if not inform the employee that his leaves will be unpaid.

Remark (if any):

Name: Signature: Date:

- Inform the originator about the leave approval and deduction if any against these leaves.
- Do the admin and then file it in the leave folder.

----- End of Form -----