

LEAVE APPLICATION

To:

My full name:

Position:

Department:

Reason for asking for leave:

Time for asking for leave: from until

☐ Paid leave

☐ Unpaid leave

Number of unused leave:

Number of used leave:

Number of applied leave:

Number of remaining leave:

Hope that Board of Company revise and create the favor condition for me to leave.

Best regard,

....., *date ... month ... year ...*

Director

(Signed, full name, sealed)

Prepared by

(Signed, full name)

LEAVE APPLICATION

To:

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Paid leave

☐

Unpaid leave

Number of unused leave:

Number of used leave:

Number of applied leave:

Number of remaining leave:

Hope Executive board of Company revise and create the favor condition for me to leave.

Best regard!

Director

(Signed, full name, sealed)

Prepared by

(Signed, full name)

SOCIALIST REPUBLIC OF VIETNAM

Independence – Freedom - Happiness

APPLICATION FOR LEAVE OF ABSENCE

To: - Director Board of ...

- Division of Administration and Human Resource

My full name is:

Title:

Work location:

Company's address:

I write this application to get the leave of absence approval by the Director Board and Division of Administration and Human Resource:

From .../.../... to .../.../...

Reason:

I will arrange my work and duties with my colleagues and undertake to return to work in due time.

Sincere thanks!

..., date ... month ... year ...

Director Board

(Signed, full name and sealed)

Applicant

(Signed, full name)

Leave of Absence Form

Applicant Name :
Date of Filing :
Organization :
Department :
Purpose for Leave :
Dates of Leave : From:..... To:.....
Number of Days :
Inclusive Days :

Type of Leave

- ☐ Annual Leave
☐ Sick Leave
☐ Compensatory Time Off
☐ Unpaid Absence
☐ Other:

Additional Remarks :
.....
.....

To Be Filled Out by Management

☐ Approved

☐ Disapproved

Reason for disapproval:
.....
.....

Employee Signature:

Date: