

# LEAVE SLIP

DATE OF REQUEST: \_\_\_\_\_ NAME: \_\_\_\_\_

CIRCLE TYPE OF LEAVE REQUESTED:

PERSONAL LEAVE

SICK LEAVE

\*OTHER

DATE AND TIME OF LEAVE: \_\_\_\_\_

DATE AND TIME OF RETURN: \_\_\_\_\_

\*EXPLANATION OF OTHER: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

APPROVED

NOT APPROVED

\_\_\_\_\_  
SUPERVISOR'S INITIALS