



## LEAVE APPLICATION FORM ACADEMIC STAFF

*Leave application to be submitted to Vice/Executive Principal at least a week prior to the leave period.*

<b>Name</b>			
<b>Date Submitted</b>	...../...../.....		
<b>Leave Type</b>	<b>Period of Leave</b>		
	<b>From</b> <small>(hours/days)</small>	<b>To</b> <small>(hours/days)</small>	<b>Total</b> <small>(hours/days)</small>
<input type="checkbox"/> Sick Leave*			
<input type="checkbox"/> Early Departure*			
<input type="checkbox"/> Leave Without Pay*			
<input type="checkbox"/> Maternity Leave			
<b>Reason for Leave</b> <small>(Note)</small>			
<b>Other Leave</b>			
Marriage / Child's marriage			
Child's circumcision/Baptism			
New baby born (Male Employee)			
Funeral of spouse / parents relative who lives in the same house			
<b>Arrangements</b>	<ul style="list-style-type: none"> <li>▪ List of classes to be covered notified to <input type="checkbox"/> Yes <input type="checkbox"/> No office</li> <li>▪ Class work left for students <input type="checkbox"/> Yes <input type="checkbox"/> No</li> <li>▪ Location of Class work.....</li> </ul>		
<b>Signature/Approval</b>	<b>Teacher</b>	<b>KS / VP / Executive Principal</b>	

*\*Please fill in the reason for leave.*



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