



RDRS Bangladesh

APPLICATION FOR LEAVE

Project Unit _____

Name with E-Code _____ (# _____) Designation _____

Type of leave _____ No. of days _____

Beginning date _____ Ending date _____

Reason for leave _____

Leave Address _____

Employee's Signature _____ Date _____

Recommended by _____ Signature _____ Date _____

Approved by: _____ Date _____
Executive Director/ Director/ Head/ Coordinator/
Program/ Project Manager or Delegated Authority

Personnel Record Unit

Earned leave taken (This year) _____

Sick leave taken (This year) _____

Days of leave accrued to date _____

Signature _____ Date _____
Personnel Record Unit

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Expected date of return from leave: _____

Actual date of return from leave _____

Employee's Signature and date _____ Approved by: _____
Executive Director/Director/
Head/Coordinator/ Program/
Project Manager or delegatec
authority

Date: _____ Date: _____

Note:

1. Complete this form in Duplicate, obtain signature of Supervisor and take to Personnel Record Unit (PRU) for noting accrued leave.
2. PRU will forward the form in duplicate for the signature of Director/Head/Coordinator/Program/Project Manager or Delegated Authority for Approval.
3. The original form will then be delivered to PRU for record.
4. On return form leave, employee is to report to Personnel Record Unit.