**Application for Vacation Leave** 

From Heads of Department (To be prepared in triplicate)

1. To: Permanent Secretary	STR
I apply to take days from//20 t	to//20 both days
included as part of my vacation leave of which I have already	A AND F
the current year.	
Employee Information	
Last Name	
First Name	
Middle Initial(s) Employee ID Nun	mber
Job Title	
Department	
Employee Signature: I	Date:/20
2. To: <u>Deputy Director, Employment</u>	
Leave recommended in accordance with vacation roster. Yes	s □ No □
Departmental arrangements will be made to cover for the period of leave.	
A substitute is required to cover, please see	attached recommendation.
Permanent Secretary D	ato: / /20
3. To: <u>Permanent Secretary, Public Administration</u>	<u>011</u>
This Employee now has days available.	
Leave is in order please approve.	
Leave was not in order but has been amended as	s indicated.
Deputy Director, Employment	Date://20
4. To: Deputy Director Employment/Head of Dep	partment/Permanent Secretary
Leave approved Yes No	
DD Employment, please take necessary action stated in section 2.	on to satisfy the substitute requirement
PS, Public Administration	
For HRI System Use Only	
Received by: Signed	Date// 20
Entered in System Signed	Date// 20