BABCOCK UNIVERSITY HUMAN RESOURCES DEPARTMENT REQUEST FOR ANNUAL LEAVE

Date:	
Name:	GSM No:
School/Division:	Department:
Status/Position:	BU Intercom No:
Date you started work at BU:	Total years of service:
Leave entitlement: Weeks	Maternity Leave due this year? Yes/No
I hereby apply for my Annual Leave for the year	as follows:
(i) From to	Resume on
(ii) From to	Resume on
I have already made arrangements for my work with my sup	pervisor as indicated below.
Please are you planning to withdraw your services from BU	this year or proceeding on minimum of two months
leave of absence? Yes No	
If "yes" from what date? Reason:	
Signature	
Approved By	
HOD/Supervisor: Dean/Division He	ad:Bursar:
SVP/DVC Acad.(for Academic Division only):	DHR:
• Upon resumption, please report to HR to complete the payroll-related Resumption of Duty Form.	
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