



the trg group

**LEAVE REQUEST RECORD**

Date submitted: \_\_\_\_\_

Name (block capitals): \_\_\_\_\_

Location/Site: \_\_\_\_\_

I request leave as follows:

From: \_\_\_\_\_ (first day of leave)

To: \_\_\_\_\_ (last day of leave)

Total number of days: \_\_\_\_\_

Duty time: \_\_\_\_\_

First day back in office: \_\_\_\_\_

Signature: \_\_\_\_\_

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**Site Manager/Supervisor Action**

Approved Signature: \_\_\_\_\_

Not Approved Signature: \_\_\_\_\_

Reason: \_\_\_\_\_

Date: \_\_\_\_\_

Relief Requested: Yes/No