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# ANNUAL LEAVE FORM

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| **Name:** |  | |  |  |
| **Position:** |  | |  |  |
| **Annual Leave Balance :** | |  | | |

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| --- | --- | --- |
| **From:** | **To:** | **Number of days** |
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| **Signed :**  **(Staff Member)** |  |
| **Approved:**  **(Manager or Nominee)** |  |