ST. XAVIER'S GLOBAL SCHOOL

LEAVE APPLICATION FORM

PART I: To be completed by applicant	
1. Name:	2. Class Teacher of
3. Number of days :	
4. Post:	
5. Date from:	
6. Date to:	
7. Type of leave required (please tick accordingly):	
i) []	ii) []
Holiday Leave Lo	eave of Absence (unpaid)
Leave balance <u>prior</u> to application: days	
Reason(s)*:	_ Reason(s)*:
iii) []	iv) []
Conference Leave	Other type of leave
On/From:	On/From:
	_
	Please specify*:
8. Forwarding address/email/contact no. during leave:	
o. 1 of warding address/citial/scontact fie. during isave.	
Signature:	Date:
PART II: For Official Use Only	
☐ Holiday Leave / Leave for Reservist Training: Approved / Not Approved	
Other type of leave (Please state:)
Comments (if any):	
Name/Signature:	Date: