

LEAVE REQUEST FORM

Written at Phatthalung School

Date Month Year.....

Subject: Asking for ☐ Sick Leave ☐ Personal Leave ☐ Other

Dear: The Director of Phatthalung School

My name is Position.....

Department.....

I would like to ask for

☐ Sick Leave because

☐ Personal Leave because

☐ Maternity Leave

From Date MonthYear..... Until Date MonthYear.....Total.....Day(s)

My last leave request ☐ Sick Leave ☐ Personal Leave ☐ Maternity Leave

From DateMonthYear..... Until Date MonthYear.....Total.....Day(s)

During my absence, I can be contacted at

..... Telephone:.....

Your sincerely

(Signature).....

(.....)

Teacher's name

(Signature).....

(.....)

Advisory Teacher

Leave Statistics

Type	Past Leave History		Present Leave		Total	
	Time(s)	Day(s)	Time(s)	Day(s)	Time(s)	Day(s)
Sick Leave						
Personal Leave						
Maternity Leave						

(Signature).....

(.....)

Head of

Consider Approved

☐ Approved ☐ Disapproved

(Signature)

(Mr. Eakaras Phetdachakul)

Vice Director of Phatthalung School

Date/...../.....

(Signature)..... Officer Incharge

(.....)

Teacher of Phatthalung School

Date/...../.....

Request for Approval

☐ Approved ☐ Disapproved

(Signature)

(Mrs. Pornpen Paewprasert)

Director of Phatthalung School

Date/...../.....