

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 Month Year..... Until Date Month Year..... Total..... Day(s)

My last leave request Sick Leave Personal Leave Maternity Leave

From Date Month Year..... Until Date Month Year..... Total..... Day(s)

During my absence, I can be contacted at

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

Your sincerely

(Signature).....

(.....)

Teacher's name

(Signature).....

(.....)

Advisory Teacher

Leave Statistics

(Signature).....

(.....)

Head of

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						

Consider Approved

- Approved
- Disapproved

(Signature)

(Mr. Bandit Sri-ngern)

Vice Director of Phatthalung School

(Signature)..... Officer Incharge

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

(.....)

Teacher of Phatthalung

- Approved
- Disapproved

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

(Signature)

(Mrs. Pornpen Paewprasert)

Director of Phatthalung School

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