

KUISCELL

THE CELL OF WISDOM

LEAVE APPLICATION FORM

NOTE/NOTA:

- Leave must be applied and approved at least three (3) working days before leave.
(Cuti mestilah di pohon dan mendapatkan kelulusan sekurang-kurangnya tiga (3) hari sebelum bercuti)
- Supporting document must be submitted within three (3) working days and it is compulsory for Compassionate Leave, Emergency Leave and Replacement Leave.
(Surat sokongan cuti mestilah dihantar dalam tempoh tiga (3) hari bekerja dan ianya terpakai bagi Cuti Ehsan, Cuti Kecemasan dan Cuti Ganti)
- Leave over three days or more should be verified by Manager and/or approval by COO / DCOO.
(Cuti yang melebihi tiga (3) hari dan ke atas perlu mendapat pengesahan daripada Pengurus dan/atau kelulusan daripada COO / DCOO)
- Employees must ensure that their application for leave is approved, otherwise to be treated as absence without leave approved/ permission.
(Pegawai perlu memastikan permohonan adalah diluluskan, atau ia akan dianggap cuti tanpa kelulusan/kebenaran)

**Section 1 – To be completed by Applicant
(Bahagian 1: Untuk diisi oleh pemohon)**

Name (Nama) : Date of Applicant (Tarikh Permohonan) :

 Emp.No (No. Pegawai) : Work Status : Department (Bahagian) :
(Status Pekerjaan: Tetap/ Kontrak)

<input type="checkbox"/> Annual Leave (Cuti tahunan)	<input type="checkbox"/> Compassionate Leave -With Supporting Document (Cuti Ehsan- beserta surat sokongan)	<input type="checkbox"/> Replacement Leave - With Supporting Document (cuti ganti- beserta surat sokongan)
<input type="checkbox"/> MC – Medical Certificate (Surat Cuti Sakit)	<input type="checkbox"/> Emergency Leave To Deduct Annual Leave -With Supporting Document (Cuti Kecemasan ditolak cuti tahunan -beserta surat sokongan)	<input type="checkbox"/> Unpaid Leave (Cuti Tanpa Gaji)

 Period : From/ Dari *To/ Hingga **OR** and/dan : No. of Day(s)/ Bil. Hari : day(s) / hari
*potong mana yang berkenaan

 Reason of Application :
(Sebab Permohonan)

 Employee Signature :
(Tandatangan Pegawai)

**Section 2 – To be completed by H.O.D. / Manager / WTM for Approval
(Bahagian 2 : Untuk diisi oleh Ketua Bahagian / Pengurus / Pengurus Tertinggi bagi kelulusan)**

 Verified by H.O.D. / Manager / WTM:
(Pengesahan oleh Ketua Bahagian/Pengurus/WTM)

 Approve / Not Approve by Manager / WTM
(Diluluskan / Tidak diluluskan oleh Pengurus / Pengurus Tertinggi)

Signature/ T.Tangan :

Name/ Nama :

Position/ Jawatan :

Date/ Tarikh :

Signature/ T.Tangan :

Name / Nama :

Position/ Jawatan :

Date/ Tarikh :

**Section 3: To be completed by HR Department for Record Approved
(Bahagian 3: Untuk diisi oleh BSM bagi Rekod Kelulusan)**

 No of day(s) Entitled : day(s) / hari
(Bil. hari yang layak)

 Updated by :
(dikemaskini oleh) (Nama/Name & Jawatan/Position)

 No of day(s) Applied : day(s)/ hari
(Bil. hari yang telah dipohon)

 Disokong:

 Balance Entitled : day (s)/ hari
(Baki yang layak)

 Tidak Disokong:

Nyatakan sebab: