**نموذج طلب إجازة**

**Vacation Form**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | *تاريخ الالتحاق* |  |  | *التاريخ* |
| Joining Date |  | Date |

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|  | *الرقم الوظيفي* |  | *اسم مقدم الطلب* |
| Employee No. | Name of Applicant |

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|  | | | | | | | | | | | | | | | *المسمى الوظيفي* |
| Job Title |
|  | | | | *رقم الهاتف/ تحويلة* | | | |  | | | | | | | *الإدارة* |
| Tel/Ext | | | | Department |
|  | | | | *تاريخ انتهاء الإجازة* | | | |  | | | | | | | *تاريخ بدء الإجازة* |
| Vacation Ending Date | | | | Vacation Starting Date |
|  | | | | | | | | | | | | | | | *عدد الايام* |
| Vacation Days |
|  |  |  | |  | |  | |  | |  | |  | |  |  |
|  | | | *بدون راتب*  *Without pay* |  | *مرضية*  *Sick leave* | |  | | *طارئة*  Emergency | | |  | *سنوية*  *Annual leave* |  | *نوع الإجازة* |
|  |  |  | |  | |  | |  | |  | |  | |  |  |
|  |  | | | | | | | | *لأسباب أخرى (حددها)*  Foranother reason (Define it) | | | | |  | Vacation Type |
|  |  |  | |  | |  | |  | |  |  | | |  |  |

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|  |  | *التاريخ* |  |  | *توقيع الموظف* |
| Date |  |  | Employee’s Signature |

|  |  |  |  |  |  |  |  |  |  |  |
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|  | | | | | | | *رأي المدير المباشر* | | | |
| Immediate Supervisor’s recommendation | | | |
|  | | | | | |  | |  |
| ***موافق وقد تم تأمين البديل***  Approved and we covered his work | | | | | | | | | |  |
|  |
| *موافق ولكن نحتاج من يحل محله*  Approved and we need who  cover his position | | | | | | | | | |  |
|  |
| *غير موافق*  Not approved | | | | | | | | | |  |
|  | | | | | |  | | | | |
|  | |  |  | |  |  | | | | |
|  | | | | *المسمى الوظيفي* | |  | | *الاسم* | | |
| Job Title | |  | | Name | | |

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|  | / / | *التاريخ* |  |  | *توقيع المدير المباشر* |
| Date |  |  | Line manger’s Signature |

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|  | / / | *التاريخ* |  |  | *توقيع مدير الإدارة* |
| Date |  | Department Manager Signature | |