LEAVE APPLICATION

STATUS: APPOINTMENT:

 UNIT:

Number: \_\_\_\_\_\_\_ Rank: \_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_

Wish to apply for \_\_\_ days (Type) Leave: \_\_\_\_\_\_\_\_

From: \_\_\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_\_

Address while on Leave:

Signed: Date:

I wish to apply for permission to reside outside the State. (See attached application)

Country:

Recommended\Not Recommended

\_\_\_\_\_\_\_\_\_\_\_\_Rank\_\_\_\_\_\_\_Appointment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

Leave in order as per AF 159

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Clerk I/C AF 159 Date:

Applicant NOT detailed for duty during the a/m periods;

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BSM Date:

Approved\Not Approved

\_\_\_\_\_\_\_\_\_\_\_\_Rank\_\_\_\_\_\_\_Appointment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

Leave Promulgated in Routine Order No: Date:

All Leave Application will be forwarded through the Sgt Major.

All pers proceeding on leave will:

1. If going in excess of seven days leave, they will personally hand over all items of kit, Ordnance and Bedding to the CQMS
2. Familiarize themselves with Unit Standing Orders and all current instructions Re Leave and DFR A.11 Para 32 Illness while on Annual or Special Leave