# THARAKA

P.O BOX 193-60215, MARIMANTI, KENYA



# UNIVERSITY

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## **OFFICE OF THE REGISTRAR** (Administration and Planning)

### LEAVE APLICATION FORM

#### NOTES:

- I. Leave application forms must be submitted in triplicate and should reach the office of the Registrar (Administration & Planning) at least 2 days before it is due to commence.
- II. Leave may only be taken after the forms have been duly approved by the Registrar (A&P).

### Part 1: To be completed by the Applicant

Name:	
P/F No.:	
Department:	
Grade:	Date:

Leave Application				Remaining Entitlement		
Leave Type	Date		No. of	Entitlement	Taken	Balance
(tick where applicable)			days			
□Annual Leave	Start	End				
□Sick Leave						
□Hospitalization Leave						
☐Maternity Leave						
Paternity Leave						
□Emergency Leave						
□Unpaid Leave						
□Study/Exam Leave						
□Compassionate Leave						
□Other						

(Exclusive of Saturdays, Sundays and Public Holidays)

I shall handover my duties to	
Contact address while on leave P.O Box	Tel:
Employee Signature:	Date:
Part 2: To be completed by the Supervisor	
Leave granted/ suspended. If suspended reasons	
Name	
Designation	
Signed Date .	
Part 3: To be completed by the HR Registrar (Administration and Planning)	
Annual entitlementAdd Leave Da	ys accumulated if any
Less Leave days taken during the year	Less Days requested
Balance Due	
Signed Dat	e
Approval Dat Vice Chancellor/DVC(AFP&D)/DVC(ARSA)/ Registrar (A	

Copies  $\sqrt{\text{Applicant}}$   $\sqrt{\text{Department}}$   $\sqrt{\text{Personal file}}$