



Notification of Return/Non-Return from Scheduled Leave

Employee Name : Badge No. :
Department : Cost Code :

Region : Riyadh Jeddah Al Ahsa

To : **Director, Human Resources**

Type of Leave : Annual Leave without Pay Midyear
 Administrative Professional Maternity
 Holiday Other : (Specify)

The above employee was granted leave (TRA copy attached) to commence on :

Ending on :

The employee's actual commencement of leave was on :

Expected date of return to work :

Attendance Status : Return (Date:)
It has to be signed by the Employee only Non-Return (To block salary)
It has to be signed by the Supervisor only

Employee Signature / Supervisor Signature

Date (G)

Note:

If the actual return date is later than the expected return date, it must be supported by a revised Travel Request & Authorization (TRA) and justification.

Approved by:

Approved

Disapproved

Dean / Department Head
(Name & Signature)

Date

Note: Once you sign this form, you must be responsible for all legal consequences which may result from any wrongful information embodied therein.