



NISHNAWBE-ASKI LEGAL SERVICES CORPORATION

REQUEST FOR LEAVE RECORD

Date: 16-Sep-2022
Name of Employee: Irene Linklater
Position: Executive Director
Supervisor: Board Chair

Form required 3 days in advance for Vacation, Sick (Medical), Management, Lieu Time and Other.

Start Time Off
Date 31-Oct-2022 Time 9:00 a.m.
Return To Work
Date 31-Oct-2022 Time 5:00 p.m.
Number of Days 1 Number of Hours 7.0

If sick leave – medical certificate provided Y or N? _____

Type of Leave

Please checkmark one.

- Lieu Time (L)
- Sick (S)
- Management
- (M) Vacation (V)

If L, S, M, & Other – Reason given:

Taking Management Leave Day from the month of SEPT. 2022

If Leave is Without Pay (Check Here)

Employee's
Signature Irene Linklater
Date 16-Sep-2022

Supervisor's
Signature [Signature]
Date SEP 18 2022

Executive Director Approval
(Required for M, B Leave) _____ Date: _____



NISHNAWBE-ASKI LEGAL SERVICES CORPORATION

REQUEST FOR LEAVE RECORD

Date: 16-Sep-2022
Name of Employee: Irene Linklater
Position: Executive Director
Supervisor: Board Chair

Form required 3 days in advance for Vacation, Sick (Medical), Management, Lieu Time and Other.

Start Time Off

Date 01-Nov-2022 Time 9:00 a.m.

Return To Work

Date 07-Nov-2022 Time 9:00 a.m.

Number of Days 4 Number of Hours _____

If sick leave – medical certificate provided Y or N? _____

Type of Leave

Please checkmark one.

- Lieu Time (L)
- Sick (S)
- Management
- (M) Vacation (V)

If L, S, M, & Other – Reason given:

**Taking 4 Vacation Days Nov 1- 4.
Return to Work on Monday Nov. 7th.**

If Leave is Without Pay (Check Here)

Employee's Signature Irene Linklater

Date 16-Sep-2022

Supervisor's Signature [Signature]

Date 16 2022

Executive Director Approval
(Required for M, B Leave)

_____ Date: _____