



**NISHNAWBE-ASKI LEGAL SERVICES CORPORATION**

**REQUEST FOR LEAVE RECORD**

Date: 25-Oct-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 07-Nov-2022 Time 9:00 a.m.

**Return To Work**

Date 08-Nov-2022 Time 9:00 a.m.

Number of Days 1 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:**

Management Day for month of October 2022

If Leave is Without Pay (Check Here)

Employee's Signature Irene Linklater

Date Oct. 25, 2022

Supervisor's Signature [Signature]

Date Oct 26 2022

Executive Director Approval  
(Required for M, B Leave)

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