



NISHNAWBE-ASKI LEGAL SERVICES CORPORATION

REQUEST FOR LEAVE RECORD

Date: 25-Jan-2023
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 13-Feb-2023 Time 09:00

Return To Work

Date 14-Feb-2023 Time 09:00

Number of Days _____ Number of Hours 7

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:

Mangement Day for the month of JANUARY 2023

If Leave is Without Pay (Check Here)

Employee's Signature Irene Linklater

Date 25-Jan-2023

Supervisor's Signature [Signature]

Date Jan 25 2023

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

Date: _____