



**NISHNAWBE-ASKI LEGAL SERVICES CORPORATION**

**REQUEST FOR LEAVE RECORD**

Date: 12/13/23  
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 December 22, 2023 Time 9:00 a.m.- 12 noon

**Return To Work**  
Date December 22, 2023 Time 12 noon

Number of Days \_\_\_\_\_ Number of Hours 3 hrs

If sick leave -- medical certificate provided Y or N? \_\_\_\_\_

<b>Type of Leave</b>	
Please checkmark one.	
<input type="checkbox"/> Lieu Time (L)	<b>If L, S, M, &amp; Other - Reason given:</b> management leave for 3 hours on Friday Dec. 22 office closes 12 noon on Dec. 22 for Christmas Slow Down Schedule.
<input type="checkbox"/> Sick (S)	
<input checked="" type="checkbox"/> Management	
<input type="checkbox"/> (M) Vacation (V)	

If Leave is Without Pay (Check Here)

Employee's Signature *Irene Linklater*  
Date Dec. 13-2023

Supervisor's Signature *[Signature]*  
Date Dec 11 2023

Executive Director Approval *11th JH.*  
(Required for M, B Leave) \_\_\_\_\_ Date: \_\_\_\_\_