APPENDIX 3

Application for Unpaid Leave approved by Permanent Secretaries

Date of request : (applications should be made in conformity with PSMC provisions & Directive 8)	
Permanent Secretary Thro' Director/Head of Department	
SECTION 1: APPLICANT'S DETAILS	
Surname	Name
Ministry/ Entity	Department/ Directorate
Grade/Position	I.D. Card No
E-Mail Address	Office Tel.
SECTION 2: TYPE OF UNPAID LEAVE (tick as appropriate)	
Political Activities Leave to contest the following elections (only applicable in respect of officers holding a politically free post)	
National Parliament D Local Counci	ils 🛛 European Parliament 🗖
Leave to try alternative employment in the private sector (salary scales 10 and higher)	
Period of Unpaid Leave being requested: From To	
Document(s) supporting request enclosed with a	application Yes No D
I, the undersigned, declare that the information and documentation submitted in this application is correct. Signature: Date:	
For Official Use: Approved Not Approved (if not approved please state reason)	
Signature of Permanent Secretary	Date:

Directors should take disciplinary action when officers fail to resume duty at the expiration of unpaid/paid leave.

The information supplied in this application form shall be used exclusively by the employing Ministry and the People & Standards Division for record keeping and verification purposes. Personal information provided on this application form is protected, and used in accordance with the provisions of the Data Protection Act.