DISTRIBUTION: *Original to officer* **ZCS Form 11B**
Copies to: Permanent Secretary to Ministry Stocked by Govt. Printer
Resident Secretary/Head of Department

ZAMBIA CIVIL SERVICE (LOCAL CONDITIONS)

APPLICATION FOR LEAVE (OTHER THAN SICK LEAVE) FOR A PERIOD OF LESS THAN THIRTY DAYS

(Officers in Division I, II and III)

To be completed and forwarded in TRIPLICATE to the Resident Secretary or Head of Department as early as possible before the proposed date of departure.

PART I

(To be completed by applicant)

Name ……. Ministry files No …….

Appointment ……. Station ……..

Ministry…….

Date of commencement of present period of qualifying service……20…….. (a)

Service in months since (a) above at date of proposed leave……..

Division in which serving…….. Rate of leave……days a month

Leave granted since (a) above……days

Leave applied for ……days, the first of which is to be ……. ……20……..

Duty to be resumed on ……20…….

Address during leave……. ……..

……

Date…… *……..*
……

Signature of applicant

PART II

(To be completed by Resident Secretary or Head of Department)

Leave approved……days

Signature……

Date……
Designation……