

**SAINT LUCIA  
APPLICATION FOR CASUAL LEAVE**

Ministry/Department .....

Name .....

Date of Entry in the Public Service .....

Grade .....

Annual Leave eligibility .....

No. of days applied for ..... From .....

to ..... both days inclusive

Where Leave is to be spent .....

**Periods of Vacation or Casual Leave  
during the past year**

<i>No. of Days</i>	<i>From</i>	<i>To</i>

Date .....  
*Signature*

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Approved.

Date .....  
*Head of Department*

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Date noted in Leave Record .....

.....  
*Personnel Division*

TO BE RETURNED TO HEAD OF DEPARTMENT