

SAMPLE (For reference only)

ANNUAL SUMMARY OF LEAVE RECORD OF NON-TEACHING STAFF

Name of School : _____

Period : _____ to _____

I confirm that each application with the supporting documents has been considered in accordance with the conditions provided by the relevant Code of Aid, the Employment Ordinance and the instructions the Permanent Secretary for Education may from time to time issue.

Name of Staff (Date of appointment)	Post	Types of Leave Taken*	Paid (P)/ No-pay (NP)	No. of Days	Remarks
1. Mr LEE x x (1.9.2011)	Laboratory Technician	SL SL AL	P NP P	28 3 14	
2. Ms WONG x x (1.9.2010)	Clerical Assistant	ML SL AL	P P P	70 2 14	

*Types of Leave – Annual Leave (AL), Sick Leave (SL), Special Tuberculosis Leave (TB), Maternity Leave (ML), Paternity Leave (PAL1), Study Leave (ST), Leave for serving as Jurors or Witnesses (JW), Leave for Special Events (LS) and Others (O).

Date: _____ Name of Supervisor: _____ Supervisor's Signature: _____