	Date:	
(Surname, Name, Phone No.)		
Request 1	for Annual and O	ther Leave
(please subm	it at least two days be	fore start date)
I request to take annual leave on/from	until	(=work day(s))
the entire day off forspecial paid or unpaid leave on, attach confirmation).		(civil servants) until(=work day(s); please
(Signature)		
For teaching staff: My teaching (lecture,	seminar, tutorial etc.)	s affected (yes/no):
For all staff: My deputy is: :	Signat	ure deputy:
Agreed:(Head of Unit)		(Dean/Head of Administration)

For Administration of the Physics Institute Eingabe Gleitzeitrechner:		laubskarte:
	Date:	
(Surname, Name, Phone No.)		
-	for Annual and O it at least two days be	
I request to take		
annual leave on/from	until	(=work day(s))
the entire day off for	on	(civil servants)
special paid or unpaid leave on, attach confirmation).	/from	until (=work day(s); please
(Signature)		
For teaching staff: My teaching (lecture,	seminar, tutorial etc.)	s affected (yes/no):
For all staff: My deputy is: :	Signat	ure deputy:
Agreed:(Head of Unit)	• •	d:(Dean/Head of Administration)
***********		***********
For Administration of the Physics Institute Eingabe Gleitzeitrechner:		lauhskarte
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