

Form 7: Special Leave

This form should not be sent to NIPSA Headquarters but directed as below:
1. Manager/Head of Branch (to see) 2. Establishment/Personnel Branch

Officer's Name in Full

Pay Number

Branch/Office

I wish to make application for special leave to attend the NIPSA Annual Delegate Conference(s) in the capacity of: *(please tick applicable)*

Delegate

General Council Member

Standing Orders Committee Member

Date of Conference

NIPSA Conference Tuesday 26 May to Thursday 28 May: I wish to attend on the following days.

(please tick all the session you wish to attend)

Tuesday	Morning	<input type="checkbox"/>
	Afternoon	<input type="checkbox"/>

Wednesday	Morning	<input type="checkbox"/>
	Afternoon	<input type="checkbox"/>

Thursday	Morning	<input type="checkbox"/>
	Afternoon	<input type="checkbox"/>

Signed:

Date:

DD.MM.YY