

## 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 27 May to Thursday 29 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