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Farm Machinery Corporation Limited
 PARO BONDEY: BHUTAN
 Post Box No: 1314
*“Prioritizing User Satisfaction with **Honesty**” The **“PUSH”***



Leave Cancellation Form

Date:...../...../.....

1. Name :
2. Designation :
3. Section/Regions :
4. Type of leave applied :
5. Cancellation period: From.....To..... (Total No of Days).....
6. Purpose of leave cancellation:

(Signature of applicant)

Authentication:

**GM/Section Head/ In-charge’s
 Remarks if any:**

Remarks and signature of Human Resource officer: