



Form A - Political Activity Leave Request

Date: _____

Employee Identification

Family Name	First Name	Initial	Person Code
Department/Public Body	Section/Division	Region	Community
Restricted Employee	Description of Political Activity		If federal election, date of nomination meeting

Leave Requested (completed by employee)

Leave Type	Leave Reason	Leave Code	Requested From	Hour HH:MM	Requested To	Hour HH:MM	Number of Hours	Verification

The leave of absence shall begin prior to an employee's declaration of candidacy and end on the day the results of the election are officially declared, or when the employee ceases to be a candidate.

I, _____ request this leave for the above stated period.

Employee Date

Leave credits verified by

Supervisor -- I am aware of this request for leave.

Supervisor Date

Deputy Head -- Is the department or public body able to meet operational requirements? No Yes

Note: Deputy Head, please forward completed form to Deputy Minister Responsible for the *Public Service Act* for processing

Deputy Head Date