

REQUEST FOR LABOUR

To Be Completed By The Applicant

Date :

To : The Director, Maintenance Dept.

From (Name):..... Position :

College/Center/Dept. : Tel. No. :

Please Provide :

(.....Nos.) None Technical Labour

(.....Nos.) Carpenter(s)

(.....Nos.) Cleaner(s)

From (Date):..... To (Date):

From (Hrs.): To (Hrs.):

Reason:

Approval of The Dean/Director:

To Be Completed By The Maintenance Department

☐ Request Is Approved. ☐ Request Is Rescheduled To:

☐ Regretted For the Following Reason:.....

Notes:

* Incomplete Form Will Not Be Considered.

* Form Should Be Sent At Least Three Days In Advance.