

UN RESTRICTED

UNITED NATIONS



NATIONS UNIES

## DISENGAGEMENT OBSERVER FORCE

SOP MILITARY

ANNEX K1

PERSONNEL BRANCH

APPLICATION FOR LEAVE &amp; RECREATION

|   |   |  |                    |  |                           |                           |                |
|---|---|--|--------------------|--|---------------------------|---------------------------|----------------|
| FAMILY NAME   | JHA   | FIRST NAME   | AMITABH            | ARRIVAL DATE                                       | 13                        | Apr                       | 23             |
| RANK  | BRIG GEN  | ID CARD N°   | 33343              | TOD (MONTHS)                                       | 12 months                 |                           |                |
| CONTINGENT  | UNDOF HQ  | BRANCH   | DFC                | DEPARTURE DATE                                     | 12                        | Apr                       | 24             |
| UN LEAVE  |   | 48 HOUR PASSES                                     |                    |  | 1 <sup>st</sup> HALF      | 2 <sup>nd</sup> HALF      |                |
| TOTAL ENTITLEMENT (2.5 X TOD)   | 30  | TOTAL PASSES ENTITLEMENT (2 X FULL 6-MONTH OF TOD) |                    |  | 2                         | 2                         |                |
| DAYS PREVIOUSLY USED (-)  | 00  | PASSES PREVIOUSLY USED (-)                         |                    |  | 0                         | 0                         |                |
| NUMBER OF DAYS AVAILABLES (=)   | 30  | NUMBER OF PASSES AVAILABLES (-)                    |                    |  | 2                         | 2                         |                |
| I REQUEST LEAVE FROM:   | 15 JUL 23   | TO   | 23 JUL 23          | USING <input checked="" type="checkbox"/> UN leave | 48 H 1 <sup>st</sup> half | 48 H 2 <sup>nd</sup> half |                |
| A detailed breakdown of my leave is as follow (check applicable leave = total days) |   |  |                    |  |                           |                           |                |
| PLACE THE NUMBER OF DAYS AS APPROPRIATE   |   |  |                    |  |                           |                           |                |
| 05  | DAYS UN LEAVE   |  |                    | DAYS CTO (ONLY DAYS WORKED IN UN HOLIDAYS)         |                           |                           |                |
| 04  | DAYS WEEKEND  |  |                    | DAYS UN SPECIAL                                    |                           |                           |                |
| 00  | DAYS UN HOLIDAYS  |  |                    | DAYS COMPASSIONATE                                 |                           |                           |                |
| 00  | DAYS (48-HOURS PASS 1 <sup>st</sup> 6-MONTH OF TOD - WEEKDAY) |  |                    | DAYS SICK LEAVE                                    |                           |                           |                |
| 00  | DAYS (48-HOURS PASS 2 <sup>nd</sup> 6-MONTH OF TOD - WEEKDAY) |  |                    | OTHER:   |                           |                           |                |
| TOTAL DAYS REQUESTED: 09  |   |  |                    |  |                           |                           |                |
| ADDRESS WHILE ON LEAVE:   |   | INDIA  |                    |  | PHONE:                    | +9194894010101            |                |
| TRAVEL ITINERARY (IF APPLY)   |   |  |                    |  |                           |                           |                |
| FROM:   | CF  | TO:  | BEIRUT             | HOTEL/ACMDTION.:                                   | HOME ADDRESS              | PHONE:                    | +9194894010101 |
| FROM:   | BEIRUT  | TO:  | INDIA              | HOTEL/ACMDTION.:                                   |                           | PHONE:                    |                |
| FROM:   | INDIA   | TO:  | BEIRUT             | HOTEL/ACMDTION.:                                   |                           | PHONE:                    | +9194894010101 |
| FROM:   | BEIRUT  | TO:  | CF                 | HOTEL/ACMDTION.:                                   |                           | PHONE:                    |                |
| REPLACEMENT:  | COS   |  |                    |  |                           | 5367                      |                |
| DATE OF REQUEST   | 05  | JUNE   | 23                 | APPLICANT'S SIGNATURE                              |                           | <i>Amit Jha</i>           |                |
| RECOMMENDED BY  |   |  |                    |  |                           |                           |                |
| RECOMMENDED BY  |   |  |                    |  |                           |                           |                |
| APPROVED BY   | FC  | MAJ GEN  | NIRMAL KUMAR THAPA |  | <i>Nhapa</i>              |                           |                |

|  |                                     |  |  |                                  |  |      |    |    |    |
|--|-------------------------------------|--|--|----------------------------------|--|------|----|----|----|
| VERIFIED BY                            |                                     |  |  |                                  |  |      |    |    |    |
| SSO PERS<br>SOPERS:                    | RANK & NAME:<br><i>MAJ N MURTYA</i> |  |  | SIGNATURE:<br><i>[Signature]</i> |  | DATE | 07 | 06 | 23 |
| REMAINING AFTER THE ABOVE REQUEST (S): |                                     |  |  | 25                               | DAYS OF UN LEAVE   |      |    |    |    |
|  |                                     |  |  | 02                               | (48-HOURS PASS 1 <sup>st</sup> 6-MONTH OF TOD - WEEKDAY) |      |    |    |    |
|  |                                     |  |  | 02                               | (48-HOURS PASS 2 <sup>nd</sup> 6-MONTH OF TOD - WEEKDAY) |      |    |    |    |

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