Adobe		Application for Leave of Absence for India Employees
This application r Absence.	nust be completed and for	rwarded to ERC via the <u>New Support Center</u> prior to start of the Leave of
Employee Name	2:	Employee Code:
Designation		
Office		
Contact Numbe	r:	;
Tel#		
LOA Period: Purpose :		To
I have read and	understood rules relatin	ng to 'Leave of Absence'. I agree to be bound by them.
Employee Signa	ture :	Date
Manager Signat	ure :	Date
HR Business Pa	rtner :	Date
* if required as per	Adobe India Policies	

Comments/Notes-----