

TRENDCELL SDN BHD (544047-T)**(HQ)****OVERTIME / REPLACEMENT LEAVE FORM**

Name :			Emp. No :				
Department :			Month :				
Date	Time		Duties Performed	Total Working Hours / Replacement Leave (day/s)			Remarks
	From	To		Normal	RD	PH	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							
31							
Total Working Hours / Replacement Leave							
Prepared by:			Approved by:				
_____			_____				
Supervisor			Head of Department				
For HR Dept only :		Recorded by :			Date :		

- Notes:
1. Original punch card must be attached together with this form and submit to HR Dept.
 2. The form must be prepared by Supervisor and approved by Head of Department.

3. The HR Dept will not accept any unclear information.