



Datum predaje/ Submission date:

Odobrenje za odsustvo Permission for Absence

	Name and Surname		Signature
Zaposlenik / employee:			
Datum odsustva/Date of absence:			
Vrijeme odsustva/Time of absence:	od (sati)/from (hours)	do (sati)/to (hours)	

Razlog odsustva/ Reason for absence: _____

Neposredni nadređeni/immediate supervisor: _____

Name and surname

Signature

NAPOMENA: Ovaj obrazac se koristi za sva odsustva zbog hitnih slučajeva, a odnosi se na odsustvo u maksimalnom trajanju od četiri sata u toku dana, i maksimalno deset sati mjesečno za koje uposlenik mora dobiti odobrenje neposrednog nadređenog. Ovaj obrazac se ne koristi za odobrenje godišnjeg odmora, jer za tu vrstu odsustva već postoji poseban obrazac u upotrebi.

NOTE: This form is used for all absences in emergency cases, up to four hours during the day, and a maximum of 10 hours a month, the employee must get approval from his/her immediate supervisor. This form is not used for annual leave approval. A special form for that type of absence is already in use.