



**SALARY ADVANCE REQUEST FORM**

Name: .....Position: .....

Department/Unit: .....

Advance amount needed (Nu.).....on (Date).....

**Reason for advance:**

.....  
.....  
.....

Dated Employee's signature: .....

**REPAYMENT SCHEDULE:** All advances must be paid before one month or else it will be deducted from the coming month salary.

Recommended by: .....Date.....

**AFO/Accountant (Finance Section)**

Approved by: ..... Date.....

**Chee Yong Lee (Head of Finance)**