

**EAGLEMATRIX SECURITY AGENCY, INC.**

**MISSION ORDER/PERMISSION TO LEAVE**

Name \_\_\_\_\_ Department/Section \_\_\_\_\_ Date \_\_\_\_\_

OFFICIAL

PERSONAL

Itinerary/Destination \_\_\_\_\_

Purpose \_\_\_\_\_

Date of Leaving \_\_\_\_\_ Departure Time \_\_\_\_\_ Expected Time of Arrival \_\_\_\_\_

Employee's Signature

Approved By:

Department Head