APPLICATION for LEAVE Official Form

Name: _____   Date: _____/_____/_____

❐ Leave applied for _____ working days

   Already approved (approved leave not taken to be removed from record)

Details of request:

First day on leave ___ / ___ / ___   Last day on leave ___ / ___ / ___   ❐ With pay -- ❐ Without pay

❐ **Annual leave**   ❐ **Long Service Leave**   ❐ **Combination of leave**
                                                                    (Note details)

Personal Leave (specify type)

❐ Sick Leave   ❐ Days in lieu (payed)   ❐ Carer

❐ Extended Leave   ❐ Maternity   ❐ Paternity

❐ Bereavement   ❐ Other (please specify)

Signature of applicant:	_____	____ / ____ / ____
Acknowledged by Manager:	_____	____ / ____ / ____
Leave Approved:	❐ YES	❐ With pay ❐ Without pay
Leave Not Approved:	_____	____ / ____ / ____
Acknowledgment returned to employee:	_____	____ / ____ / ____

Office Use Only   Initials   Date

❐ Noted in personnel file
❐ Noted on payroll records   – – – – – –   ____ / ____ / ____

❐ Copy noted in admin. Leave file   – – – – – –   ____ / ____ / ____

   Application for leave/credit   ___ / ___ / ___   ❐ Has been recorded.

Details or Leave entitlement: **Comments as noted.**

Holiday Leave _____ days.   Anniversary date ___ / ___ / ___   _____

Personal Leave _____ days.   (including sick leave) ___ / ___ / ___   _____

Long Service Leave _____ days.   Days / Weeks / Months ___ / ___ / ___   _____