

# LEAVE PLAN

For current year



Name			
Staff Number			
Position Title			
Organisational Unit			
Annual Leave balance			
Academic Deferred Leave balance			
Long Service Leave balance (if eligible)			
PLANNED LEAVE			
Leave Type	From	To	Subtotal
Total			

Submit the completed form to your Supervisor for consideration and discussion. This form is to be retained by your Supervisor<sup>1</sup>.

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<sup>1</sup> (Academic staff only) When submitting an "Accrued Annual Leave – Deferral Request" form, please ensure a copy of your Leave Plan is attached.