



Employee Request for Annual Leave

Employee Name: GLYN WARD

I request PAID leave from work as follows:

Commencing: 11 APRIL

Ending: 14 APRIL

Number of days to be taken: 4

I request UNPAID leave from work as follows:

Commencing: _____

Ending: _____

Number of days to be taken: _____

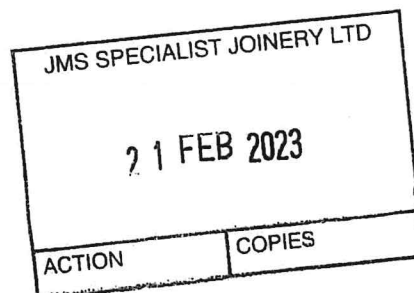
Please Note: Unpaid leave cannot be taken until all leave entitlement is used up and no unpaid leave can be taken without the prior authorisation of Richard or Martin.

Employee's Signature: _____

Authorised by: _____

J.R. Hayhoe: _____

M. O'Brien: _____



Office use only:
Days remaining 15

DOCUMENT REFERENCE:	ADM-FM-001 HOLIDAY REQUEST FORM	VERSION NO:	1.1	CREATION DATE:	27/03/2013	Page 1 of 1
DOCUMENT OWNER:	DS			LAST REVISION DATE: NEXT REVIEW DATE:	22/12/2021 TBC	