

Leave Application and Approval Form

Employee Details

Centre:

Staff Name:

Leave Type

I wish to apply for the following type(s) of leave (*please tick*):

- | | |
|---|--|
| <input type="checkbox"/> Annual Leave | <input type="checkbox"/> Long Service Leave |
| <input type="checkbox"/> Personal / Carer's Leave | <input type="checkbox"/> Community Service Leave |
| <input type="checkbox"/> Compassionate Leave | <input type="checkbox"/> Other: _____ |

Documentation attached? (*please circle*) Yes / No

If multiple types of leave are applied for, please specify:

Period of Leave

Last Day of Work:

Return to Work Date:

Total Number of Hours of Leave Requested:

My most recent payslip leave balance was recorded as:

Comments

Signature of employee: _____ Date: ____ / ____ / ____

Approval of Leave (to be completed by a Committee Member)

☐ **Approved**

☐ **Not Approved**

Reason for Refusal (if applicable)

Signature of Committee Member: _____ Date: ____ / ____ / ____

Name: _____

Position: _____