

TEMP WORKER HOLIDAY FORM

**THIS APPLICATION MUST BE COMPLETED AND
APPROVED PRIOR TO HOLIDAY BEING TAKEN**

1. Temp completes application
2. Manager signs application
3. Consultant authorises paid Holiday

Surname: Forename:

Site: Position:

Please state total No. of days
required:

From: To:

Operator Signature: Date:

Manager's Signature: Date:

Consultant Approval

(tick ✓)

Authorised by Manager

Approved by Consultant

Date Processed
