

CAMERON OUTDOOR

LEAVE APPLICATION
(to be completed and submitted to Office for all absence of leave)



PERSONAL DETAILS:

Name:

Position:

Supervisor:

TYPE OF LEAVE:

- | | ☒ | No of Days |
|------------------|--|------------|
| 1. Annual Leave | ☐ | |
| 2. Carer's Leave | ☐ | |
| Total No of Days | | |

Pay Office Use

- | | |
|-------|-------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| Total | |

LEAVE TO BE TAKEN:

Day From/...../..... (first day of leave)

Day To/...../..... (last day of leave)

Day Date of Return to Work:/...../.....

Pay Office Use

APPROVAL:

Applicant: Date:/...../.....
(Print Name and Sign)

Supervisor: Date:/...../.....
(Print Name and Sign)

Office Manager: Date:/...../.....
(Print Name and Sign)

Note: All Signatures must be present in order for leave to be paid. Un-authorised Leave will be processed as un-paid until further documentation is provided.

If there is a change of day/s dates for this leave, a new form with the total days/dates is to be submitted with the word 'AMENDED' clearly written on it.

PLEASE FORWARD TO PAY OFFICE

Annual Leave will be paid on a week by week basis as with normal pay unless specifically requested in writing.