**Annual Leave Request Form**

This form is only to be used by employees who do not have access to Employee Self Service.

|  |  |
| --- | --- |
| **Employee Details** | |
| Full name |  |
| Employee number |  |

|  |  |
| --- | --- |
| **Period of Annual Leave Requested** | |
| First day of leave |  |
| Final day of leave |  |
| Total number of hours |  |
| Use the space below to indicate any half days of leave being requested and/or if this request is to change previously booked leave | |
|  | |

|  |  |
| --- | --- |
| **Employee Signature** | |
| Signature |  |
| Date |  |
| **Submit the completed form to your leave approver** | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Leave Approval** | | | |
| The request has been (delete as appropriate) | | Approved | Rejected |
| Signature |  | | |
| Date |  | | |