

ANNUAL HOLIDAYS

EMPLOYEES NAME

DEPARTMENT

CURRENT HOLIDAY ENTITLEMENT DAYS

(Inclusive Dates) From To		No. Of Days	Approved By	Days Remaining

I agree that if I leave my employment for any reason, payment for any holidays taken but not earned pro-rata in the current holiday year may be deducted from any final wage or salary (see Employee Handbook).

If such final payment does not equal this outstanding amount then I agree to reimburse my employer directly and in equal amount.

Signed