**LEAVE REQUEST APPLICATION FORM**

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| **EMPLOYEE DETAILS** | |
| **Leave Application Date:** |  |
| **Employee Name:** |  |
| **Department** |  |
| **Employment Status (FT/PT)** |  |
| **Leave Start Date:** |  |
| **Leave Finish Date:** |  |
| **Return to Work Date:** |  |

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| **STANDARD LEAVE REQUEST – TEAM LEADER ONLY - APPROVAL REQUIRED** | | |
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| **LEAVE TYPE** | **REASON FOR LEAVE** | **HOURS TAKEN** |
| **Annual Leave** (2 weeks or less) |  |  |
| **Personal Leave – Sick Leave**  (2 days or less) |  |  |
| **Personal Leave – Carers Leave**  (2 days or less) |  |  |
| **Personal Leave – Personal Business**  (2 days or less) |  |  |
| **Total Number of Work Days Taken:** |  |  |

***Note:*** *When taking Personal Leave, for absences of 1 day or more, a medical certificate or statutory declaration is required. Please ensure this is submitted along with completed Leave Form.*

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| **ACKNOWLEDGEMENT** | |
| **Employee Signature:** |  |

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| **APPROVALS** | |
| **Team Leader Name:** |  |
| **Team Leader Signature:** |  |
| **Date:** |  |
| **Genie Updated:** | **YES  NO** |
| **Replacement Required:** | **YES  NO** |
| **Replacement Organised:** | **YES  NO** |

***Note:*** *if unsure of the correct leave to apply for, please speak with HR for clarification before approving any requests.*

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| **NON-STANDARD LEAVE REQUEST – BOTH EXECUTIVE COMMITTEE AND TEAM LEADER APPROVAL REQUIRED** | | |
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| **LEAVE TYPE** | **REASON FOR LEAVE** | **Work DAYS TAKEN** |
| **Annual Leave** (2 weeks or more) |  |  |
| **Personal Leave – Sick Leave**  (3 days or more) |  |  |
| **Personal Leave – Carers Leave**  (3 days or more) |  |  |
| **Personal Leave – Personal Business**  (3 days or more) |  |  |
| **Other Leave:** |  |  |
| **Total Number of Days Taken:** |  |  |

***Note:*** *When taking Personal Leave, for absences of 1 day or more, a medical certificate or statutory declaration is required. Please ensure this is submitted along with completed Leave Form.*

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| **ACKNOWLEDGEMENT** | |
| **Employee Signature:** |  |

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| **APPROVALS** | |
| **1st Approval –Team Leader Approval:** | Name & Signature |
| **2nd Approval – Executive Committee:** | Name & Signature |
| **Date:** |  |
| **Genie Updated:** | **YES  NO** |
| **Replacement Required:** | **YES  NO** |
| **Replacement Organised:** | **YES  NO** |

***Note:*** *if unsure of the correct leave to apply for, please speak with HR for clarification before approving any requests.*

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| **HUMAN RESOURCES USE ONLY** | |
| **Planner Updated:** | **YES  NO** |
| **Personnel Record Updated:** | **YES  NO** |