

Novus Altair HOLIDAY APPLICATION FORM

YOU ARE REQUESTED TO GIVE AS MUCH NOTICE AS POSSIBLE WHEN MAKING A REQUEST FOR HOLIDAY ENTITLEMENT. HOWEVER, THIS MUST BE NOT LESS THAN FOUR WEEKS NOTICE. THE COMPANY RESERVES THE RIGHT TO DENY ANY REQUEST FOR ANNUAL LEAVE. ANY REQUEST FOR ANNUAL LEAVE IN EXCESS OF 14 DAYS WILL NOT NORMALLY BE GRANTED.

NAME:	PAYROLL NUMBER:	DATE OF APPLICATION:
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I WISH TO APPLY FOR ANNUAL LEAVE

FROM (DAY) (DATE) (TIME) (INC)

TO (DAY) (DATE) (TIME) (INC)

PLEASE PAY ME FOR DAYS

I WILL BE AVAILABLE TO RESUME WORK ON

(DAY) (DATE) (TIME)

SIGNATURE OF APPLICANT:

HOLIDAY CANCELLATION

I WISH TO CANCEL MY ABOVE REQUESTED LEAVE: SIGNATURE.....

CANCELLATION AUTHORISED BY LINE MANAGER: SIGNATURE.....

DATE CANCELLED:

OFFICE USE ONLY

NUMBER OF DAYS ENTITLEMENT ALREADY TAKEN..... REMAINING.....

CHECKED BY PERSONNEL NAME DATE

AUTHORISED BY OPERATIONS MANAGER NAME DATE

.....
Detach

YOUR APPLICATION FOR ANNUAL LEAVE HAS BEEN GRANTED / REFUSED FOR THE DATES YOU HAVE APPLIED FOR

SIGNATURE OF LINE MANAGER..... DATE.....